July 2017
Form must be Typed
Form must be signed

TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

Phone 620.902.6450

Phone 785.261.6250

OPERATOR: License#					API No. 15-				
Name:					Spot Description:				
Address 1:					Sec Twp S. R E W feet from N / S Line of Section				
									City: State: Zip: +
Contact Person:					GPS Location: Lat:, Long:				
Phone:()					Datum: NAD27 NAD83 WGS84 County:				
(Lease Name: Well #:				
Contact Person Email:					Well Type: (check one) Oil Gas OG WSW Other:				
Field Contact Person:					SWD Permit #: ENHR Permit #:				
Field Contact Person Phone: ()					Gas Storage Permit #:				
					Spud Date:		Date Shut-In:		
	Conduc	ctor	Surface	Pro	oduction	Intermediate	Liner	Tubing	
Size									
Setting Depth									
Amount of Cement									
Top of Cement									
Bottom of Cement									
Casing Fluid Level from Su	ırface.		How De	termined?			D)ate:	
Casing Fluid Level from Surface: How Determined? Casing Squeeze(s): to w / sacks of cement, to w / sacks of cement.									
		,			(тор)	(bottom)			
Do you have a valid Oil & C									
Depth and Type:	in Hole at	Too	ols in Hole at	Ca	sing Leaks:	Yes No Depth o	f casing leak(s):		
Type Completion: ALT	T. I ALT. II	Depth of:	DV Tool:	w/_	sack	s of cement Port Co	llar: w / .	sack of cement	
Packer Type:							(depth)		
Total Depth:	ral Depth: Plug Back Depth: F					Plug Back Method:			
Geological Date:									
Formation Name	ı	Formation Top	Formation Base			Completion In	nformation		
At: to Feet Perforation Interval to Feet or Open Hole Interval to								l to Feet	
?						ration Interval toFeet or Open Hole Interval toFeet			
		,		1 0110	ration into var		or open ridio interva		
INDED DENALTY OF DE	B IIIBV I UEBI	DV ATTECT TI	JATTUE INEODMA	TION CO	NITAINED LIEB	EIN IS TOLIE AND COR	DECT TO THE DECT	JE MV KNOWI EDGE	
			Submitte	ed Ele	ctronicall	y			
Do NOT Write in This	Date	Tested:	P	eculte.		Date Plugged:	Date Repaired: Date	e Put Back in Service:	
Do NOT Write in This Date Tested: Results: Space - KCC USE ONLY					Date i lugged. Date Repaired. Date i di Dack in Gervice.				
Daview Consulated how				0					
Review Completed by: TA Approved: Yes	Denied	Date:		Comm	nents:				
				·	_				
	,		Mail to the App	ropriate l	KCC Conserv	vation Office:			
Depart Spire Seas Seas State Sea Sea Seas Season	KCC District Office #1 - 210 E. Frontview, Suit				e A, Dodge City, KS 67801			Phone 620.682.7933	
	KCC District Office #2 - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226						Phone 316.337.7400		

KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720

KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651

Conservation Division District Office No. 1 210 E. Frontview, Suite A Dodge City, KS 67801



Phone: 620-682-7933 http://kcc.ks.gov/

Laura Kelly, Governor

Susan K. Duffy, Chair Shari Feist Albrecht, Commissioner Dwight D. Keen, Commissioner

June 16, 2020

Glade Inhofe Prairie Gas Operating, LLC 114 E. 5TH ST., SUITE 100 PO BOX 2170 TULSA, OK 74101-2170

Re: Temporary Abandonment API 15-071-20076-00-00 HARDING 1 SW/4 Sec.10-20S-40W Greeley County, Kansas

Dear Glade Inhofe:

"Your temporary abandonment (TA) application for the well listed above has been approved. In accordance with K.A.R. 82-3-111 the TA status of this well will expire 06/16/2021.

- * If you return this well to service or plug it, please notify the District Office.
- * If you sell this well you are required to file a Transfer of Operator form, T-1.
- * If the well will remain temporarily abandoned, you must submit a new TA application, CP-111, before 06/16/2021.

You may contact me at the number above if you have questions.

Very truly yours,

Michael Maier"