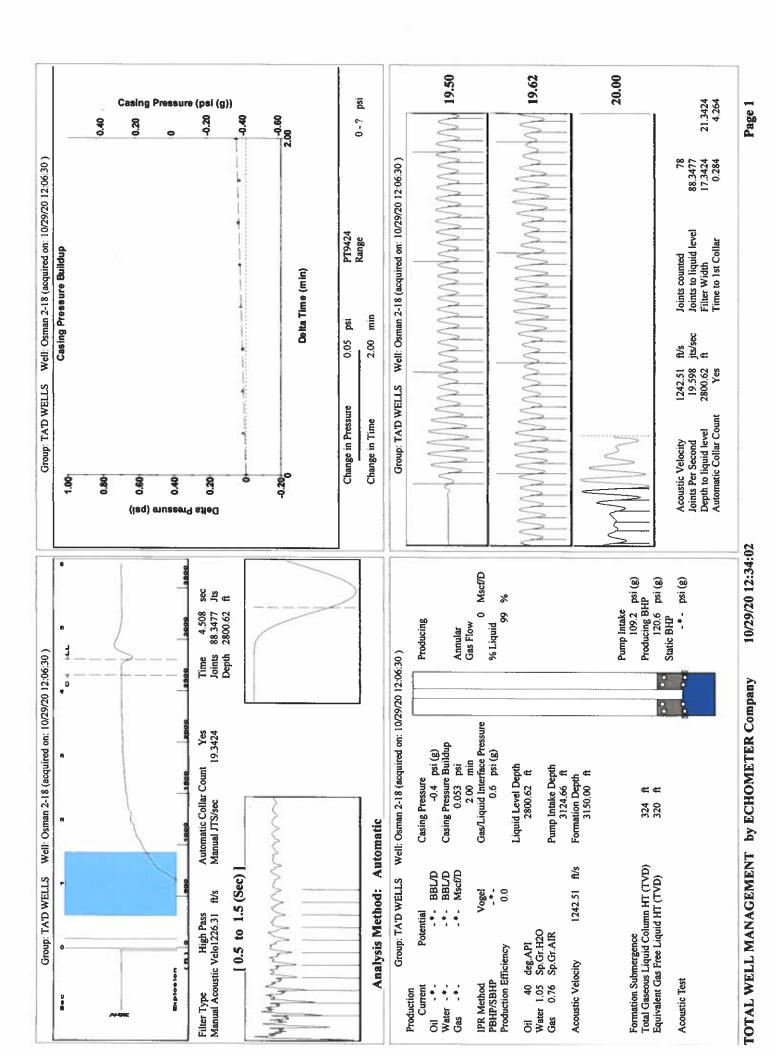
KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

July 2017 Form must be Typed Form must be signed All blanks must be complete

## **TEMPORARY ABANDONMENT WELL APPLICATION**

| OPERATOR: License#                                      |                        |                    |          | API No. 15Spot Description:                                       |  |                           |                |           |  |                                 |
|---|------------------------|--------------------|----------|---|--|---------------------------|----------------|-----------|--|---------------------------------|
|   |                        |                    |          |   |  |                           |                |           |  | Address 1:                      |
| Address 2:  |                        |                    |          |   |  | feet from N /             |                |           |  |                                 |
| City: +   |                        |                    |          | GPS Location: Lat:, feet from E / W Line of Section, Long:, Long: |  |                           |                |           |  |                                 |
| Contact Person:   |                        |                    |          | Datum:  | (e.g. xx.xxxx<br>NAD27 NAD83                           | x)<br>] WGS84             | (e.gxxx.xxxxx) |           |  |                                 |
| Phone:( )  Contact Person Email:  Field Contact Person: |                        |                    |          | County: Elevation: GL KB  |  |                           |                |           |  |                                 |
|   |                        |                    |          | Lease Name:   |  |                           |                |           |  |                                 |
|   |                        |                    |          |   |  |                           |                |           |  | Field Contact Person Phone: ( ) |
|   |                        |                    |          |   | · ·  | Date Shut-In:             |                |           |  |                                 |
|   | Conductor              | Surface            | Pro      | oduction  | Intermediate   | Liner                     | Tubing         | <br>J     |  |                                 |
| Size  |                        |                    |          |   |  |                           |                |           |  |                                 |
| Setting Depth   |                        |                    |          |   |  |                           |                |           |  |                                 |
| Amount of Cement  |                        |                    |          |   |  |                           |                |           |  |                                 |
| Top of Cement   |                        |                    |          |   |  |                           |                |           |  |                                 |
| Bottom of Cement  |                        |                    |          |   |  |                           |                |           |  |                                 |
| Casing Fluid Level from Sur                             |                        |                    |          |   |  |                           |                |           |  |                                 |
| Casing Squeeze(s):                                      | to w /                 | Sacks of ce        | e.ii.,   | (top)   | (bottom)   | Sacks of Cernetic. Date   |                |           |  |                                 |
| Do you have a valid Oil & G                             | as Lease?              | No                 |          |   |  |                           |                |           |  |                                 |
| Depth and Type:   | n Hole at              | Tools in Hole at   | Ca       | sing Leaks:   | Yes No Depth of  | of casing leak(s):        |                |           |  |                                 |
| Type Completion: ALT.                                   |                        |                    |          |   |  |                           |                | of cement |  |                                 |
| Packer Type:  |                        |                    |          |   |  | (depth)                   |                |           |  |                                 |
| Total Depth:  | Plug Bac               | k Depth:           |          | Plug Back Meth  | od:  |                           |                |           |  |                                 |
| Geological Date:  |                        |                    |          |   |  |                           |                |           |  |                                 |
| Formation Name  | Formation <sup>-</sup> | Top Formation Base |          |   | Completion I   | nformation                |                |           |  |                                 |
| 1   | At:                    | to Feet            | Perfo    | ration Interval   | to Fee   | t or Open Hole Interval _ | to             | Feet      |  |                                 |
| 2   |                        | to Feet            |          |   |  | t or Open Hole Interval _ |                | Feet      |  |                                 |
|   |                        |                    |          |   |  |                           |                |           |  |                                 |
| INDED DENALTY OF DED                                    | IIIBV I LIEBEBV ATTE   |                    |          |   |  | DECTTO THE DEST OF        | MA NIOWI E     | :DCE      |  |                                 |
|   |                        | Submitt            | ed Ele   | ctronicall  | у  |                           |                |           |  |                                 |
| Do NOT Write in This Date Tested:  Space - KCC USE ONLY |                        | R                  | Results: |   | Date Plugged: Date Repaired: Date Put Back in Service: |                           |                |           |  |                                 |
| Review Completed by:                                    |                        |                    | Comn     | nents:  |  |                           |                |           |  |                                 |
| TA Approved: Yes  |                        |                    |          |   |  |                           |                |           |  |                                 |
|   |                        |                    |          |   |  |                           |                |           |  |                                 |
|   |                        | Mail to the Ann    | ronriato | KCC Conserv   | ration Office:   |                           |                |           |  |                                 |

| these had been not take the and from home and was been been  | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801               | Phone 620.682.7933 |
|--|--|--------------------|
| 100 100 100 100 100 100 100 100 100 100  | KCC District Office #2 - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226 | Phone 316.337.7400 |
| The contract of the contract o | KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720                            | Phone 620.902.6450 |
|  | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651                      | Phone 785.261.6250 |



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 Dwight D. Keen, Commissioner Andrew J. French, Commissioner

December 01, 2020

Katherine McClurkan Merit Energy Company, LLC 13727 Noel Road, Suite 1200 Dallas, TX 75240-7362

Re: Temporary Abandonment API 15-189-20520-00-00 Osman 2-18 N/2 Sec.18-34S-38W Stevens County, Kansas

## Dear Katherine McClurkan:

"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 12/01/2021.

- \* 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 12/01/2021.

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

Very truly yours,

Michael Maier"