KOLAR Document ID: 1541350

Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

Form must be Typed

## **TEMPORARY ABANDON**

OPERATOR: License# \_\_\_\_\_

Contact Person Email: \_\_\_\_\_

Field Contact Person Phone: ( \_\_\_\_\_ ) \_\_\_\_

Casing Fluid Level from Surface:\_\_\_\_\_

Do you have a valid Oil & Gas Lease? Yes No

Conductor

Casing Squeeze(s): \_\_\_\_\_ to \_\_\_\_ w / \_\_\_\_ sacks of cement,

Type Completion: ALT. I ALT. II Depth of: DV Tool: (depth)

\_\_ Plug Back Depth: \_\_\_

Formation Top Formation Base \_\_\_\_\_ At: \_\_\_\_\_ to \_\_\_\_ Feet

\_\_\_\_\_ Size: \_\_\_

2. \_\_\_\_\_ At: \_\_\_\_ to \_\_\_\_ Feet

LINDED DENALTY OF DED HIDY LUEDEDY ATTEST THAT THE INFORMATION O

\_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_ + \_ \_ \_ \_ \_

Surface

Address 1: \_\_\_ Address 2: \_\_\_\_

Size

Setting Depth Amount of Cement Top of Cement **Bottom of Cement** 

Packer Type: \_\_\_ Total Depth: \_\_\_

Geological Date: Formation Name

Contact Person: \_\_\_\_ Phone:( \_\_\_\_\_ ) \_\_\_

Field Contact Person: \_\_\_\_\_

A B A NII		NT WEI	L APPLICA	TION 4	Form must be signed II blanks must be complete				
ADAM		INI VVEL	L APPLICA	IION A	n blanks must be complete				
		API No. 15							
		Spot Description:							
					E				
+					/ W Line of Section				
·		GPS Location: Lat:, Long:							
		County:	Elev	ration:	GL KB				
					#: Other:				
					it #:				
		_	e Permit #:						
		Spud Date:		Date Shut-In:					
face	Produc	ction	Intermediate	Liner	Tubing				
				_					
					ate:				
_ Sacks of ce	to	p) (boti	tom)	_ sacks of certient. Do	ate:				
(dept	h)			casing leak(s):					
ol:	w/	sacks of	cement Port Coll	ar: w / _ <i>(depth)</i>	sack of cement				
	Inch Set	at:	Feet						
	Plug	g Back Method:							
tion Base			Completion In	formation					
Feet	Perforati	on Interval	toFeet	or Open Hole Interval	to Feet				
Feet	Perforati	on Interval	to Feet	or Open Hole Interval	toFeet				
IE INEODMA	TION CONT	VINED HEDEIN	ISTRUE AND COR	DECTTO THE DEST O	E MV KNOW! EDGE				
Supmitt	ed Electi	ronically							

## Submitted El

Do NOT Write in This Space - KCC USE ONLY	Date Tested:	Results:	Date Plugged:	Date Repaired:	Date Put Back in Service:
Review Completed by:		Comments:			
TA Approved: Yes D	Denied Date:				

## Mail to the Appropriate KCC Conservation Office:

Notes been from the total and facility many first pro-	KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801	Phone 620.682.7933
The trans of the case of the c	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	Phone 620.902.6450
Similar Street S	KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651	Phone 785.261.6250

Conservation Division District Office No. 3 137 E. 21st Street Chanute, KS 66720



Phone: 620-902-6450 http://kcc.ks.gov/

Laura Kelly, Governor

Susan K. Duffy, Chair Dwight D. Keen, Commissioner Andrew J. French, Commissioner

January 11, 2021

TRACY MILLER Cherokee Wells LLC PO BOX 296 FREDONIA, KS 66736

Re: Temporary Abandonment API 15-205-26011-00-01 HOLDERMAN A-1 NE/4 Sec.34-28S-14E Wilson County, Kansas

## Dear TRACY MILLER:

"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 01/11/2022.

- \* 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 01/11/2022.

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

Very truly yours,

Dallas Logan E.C.R.S."