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,

Depth and Type: Usual Junk in Hole at (depth) Tools in Hole at (depth) Type Completion: ALT. I ALT. II Depth of: DV Tool: (depth)

\_\_\_\_\_ At: \_\_\_\_\_ to \_\_\_\_ Feet

LINDED DENALTY OF DED HIDY LUEDEDY ATTEST THAT THE INCOMMATION OF

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

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

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

\_\_\_\_\_ 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: \_\_\_

ABANI	DONMENT V	VELL APPLICA	TION AII	Form must be signed blanks must be complete				
	API No. 1	5						
	Spot Des	cription:						
+		Sec	feet from N /	S Line of Section W Line of Section				
	Datum: [	GPS Location: Lat:, Long:						
		Lease Name: Well #:						
	SWD	: (check one)  Oil Ga Permit #: Storage Permit #:	ENHR Permit	t #:				
	Spud Dat	e:	Date Shut-In:					
face	Production	Intermediate	Liner	Tubing				
How De	termined?		Da	te:				
_ sacks of ce	ement, to to	W /	sacks of cement. Da	te:				
ole at	Casing Leaks:	Yes No Depth of	f casing leak(s):					
		cks of cement Port Col						
		Feet	(depth)					
	Plug Back Me	ethod:						
tion Base		Completion Ir	nformation					
Feet	Perforation Interva	altoFeet	or Open Hole Interval	to Feet				
Feet	Perforation Interva	al to Feet	or Open Hole Interval	toFeet				
IE INEODMA	ATION CONTAINED UP	EDEIN IS TOLIE AND COD	DECTTO THE DEST OF	EMV KNOW! EDGE				
Submitt	ed Electronica	lly						

## 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. 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

January 12, 2021

Sharon Sequera Scout Energy Management LLC 4901 LBJ FREEWAY SUITE 300 DALLAS, TX 75244-6107

Re: Temporary Abandonment API 15-093-21259-00-00 LINDNER GU 2HI NE/4 Sec.28-23S-38W Kearny County, Kansas

## Dear Sharon Sequera:

"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 01/12/2022.

- \* 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 01/12/2022.

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

Very truly yours,

Michael Maier"