KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form CP-111
July 2017
Form must be Typed
Form must be signed
All blanks must be complete

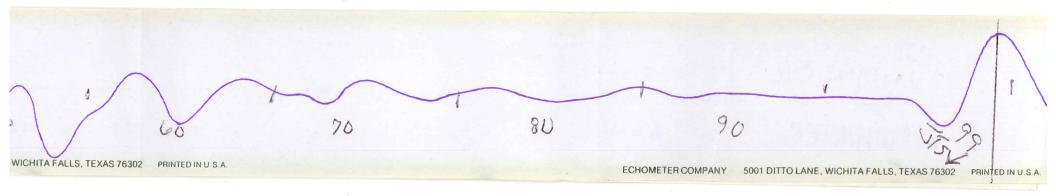
TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License# | | | | API No. 15- | | | | | |
|---|-----------------------|----------------------------------|----------|--|-----------------------|--------------------|--------------------------|--|--|
| Name: | | | | Spot Descr | iption: | | | | |
| Address 1: | | | | | | | | | |
| | | | | feet from N / S Line of Section | | | | | |
| City: | | feet from E / W Line of Section | | | | | | | |
| Contact Person: | | GPS Location: Lat:, Long:, Long: | | | | | | | |
| Phone:() | | | | Datum: NAD27 NAD83 WG584 County: GL KB | | | | | |
| Contact Person Email: | | | | Lease Name: Well #: | | | | | |
| Field Contact Person: | | | | Well Type: (| (check one) 🗌 Oil 🔲 G | as OG WSW | Other: | | |
| Field Contact Person Phon | e:()_ | | | Gas Sto | orage Permit #: | | rmit #: | | |
| | Conductor | Surface | Pro | oduction | Intermediate | Liner | Tubing | | |
| Size | | | | | | | | | |
| Setting Depth | | | | | | | | | |
| Amount of Cement | | | | | | | | | |
| Top of Cement | | | | | | | | | |
| Bottom of Cement | | | | | | | | | |
| Casing Fluid Level from Su Casing Squeeze(s): | to w | / sacks of ce | | | | | Date: | | |
| Depth and Type: | in Hole at [| Tools in Hole at | Ca | sing Leaks: | Yes No Depth of | of casing leak(s): | | | |
| | | | | | | | / sack of cemen | | |
| Packer Type: | | | | | | (dopar) | | | |
| Total Depth: | Plug Ba | ck Depth: | | Plug Back Meth | od: | | | | |
| Geological Date: | | | | | | | | | |
| Formation Name Formation Top Formation Base | | | | Completion Information | | | | | |
| 1 2 | | to Feet to Feet | | | | | val toFeet val toFeet | | |
| INDED DENALTY OF BEI | D IIIDV I UEDEDV ATTE | ECT TUAT THE INCODMA | ATION CO | NTAINED HED | EIN IS TRUE AND COL | DECTTO THE DECT | FOE MV KNOW! EDGE | | |
| | | Submitt | ed Ele | ctronicall | у | | | | |
| Do NOT Write in This Space - KCC USE ONLY | | | esults: | | Date Plugged: | Date Repaired: D | ate Put Back in Service: | | |
| Review Completed by: | | | Comn | nents: | | | | | |
| TA Approved: Yes | | | | | | | | | |
| | | | | | | | | | |

Mail to the Appropriate KCC Conservation 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 |
|--|--|--------------------|
| 1000 1000 1000 1000 1000 1000 1000 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 |

| 210 HATGU | 4 JAN 2021 | | 1 | f | |
|-----------|--|----|-------------------|----|----|
| WHIRTER | LA WE WO. ECHOMETER COMPANY 5001 DITTO | 10 | PRINTED IN U.S.A. | 36 | 90 |



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

Anthony Farrar Indian Oil Co., Inc. 308 S. Main St. PO BOX 209 MEDICINE LODGE, KS 67104-0209

Re: Temporary Abandonment API 15-101-20467-00-00 MCWHIRTER 1 SW/4 Sec.10-19S-29W Lane County, Kansas

Dear Anthony Farrar:

"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"