KOLAR Document ID: 1542699

Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

Form must be Typed

TEMPORARY ABANDONMENT WELL APPLICATION

______ State: _____ Zip: _____ + __ _ _ _ _

Surface

OPERATOR: License# _____

Address 1:

Address 2:

Size

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

Packer Type: ___

Total Depth:

Geological Date: **Formation Name**

Casing Fluid Level from Surface: ____

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

Contact Person: ___

Phone:(_____) __

Contact Person Email: ___

Field Contact Person: ___

Field Contact Person Phone: (_____) ____

Conductor

__ Size: __

__ Plug Back Depth: ___

Formation Top Formation Base

_____ At: _____ to ____ Feet

___ At: _____ to _____ Feet Perforation Interval ____

Form must be signed All blanks must be complete API No. 15-Spot Description: ___ _ - ___ - ___ Sec. ____ Twp. ____ S. R. ___ 🗌 E 🦳 W _____ feet from N / S Line of Section _____ feet from E / W Line of Section _____ , Long: _____ (e.g. xx.xxxxx) Datum: NAD27 NAD83 WGS84 _____ Elevation:____ ____ GL KB County: __ Well #: __ Lease Name: ___ Well Type: (check one) Oil Gas OG WSW Other: SWD Permit #: _____ ENHR Permit #: ____ Gas Storage Permit #:____ Spud Date: __ ___ Date Shut-In: _ Tubing Production Intermediate Liner ___ How Determined? ____ Casing Squeeze(s): _____ to ____ w / ____ sacks of cement, ____ to ____ w / ____ sacks of cement. Date: ___ Depth and Type:

Junk in Hole at ______ Tools in Hole at _____ Casing Leaks: Yes No Depth of casing leak(s): _____ (depth) (depth)

Type Completion: ALT. I Depth of: DV Tool: _____w / _____ sacks of cement Port Collar: ____w / ____ sack of cement _ Inch Set at: ___

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Perforation Interval _____ to ____ Feet or Open Hole Interval ____

Completion Information

____to_____ Feet or Open Hole Interval _____ to _____ Feet

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

Submitted Electronically

___ Plug Back Method: ___

Mail to the Appropriate KCC Conservation Office:

	KCC District Office #1 - 210 E. Frontview, Suite 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	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. 3 137 E. 21st Street Chanute, KS 66720



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

Laura Kelly, Governor

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

January 20, 2021

DEB BALLARD Colt Energy Inc PO BOX 388 IOLA, KS 66749-0388

Re: Temporary Abandonment API 15-125-32366-00-00 WRIGHT I E3 SW/4 Sec.06-33S-15E Montgomery County, Kansas

Dear DEB BALLARD:

"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 01/20/2022.

- * 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 01/20/2022.

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

Very truly yours,

Dallas Logan E.C.R.S."