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)

___ Size: ___

__ Plug Back Depth: ___

Formation Top Formation Base ____ At: ____ to ____ Feet

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: ___

d? Date: to w / sacks of cement. Date: Casing Leaks: Yes No Depth of casing leak(s): / sacks of cement Port Collar: w / sack of cement ch Set at: Feet	MENT W	ELL APPLICA	TION AI	Form must be signed I blanks must be complete
	API No. 15-			
feet from	Spot Descr	iption:		
Spud Date: Date Shut-In:	GPS Locati Datum: County: Lease Nam Well Type: (on: Lat:	feet from N / feet from E / feet from E / N / N / Feet from WE / N / N / N / N / N / N / N / N / N / N	S Line of Section W Line of Section (e.gxxx.xxxxx) GL KB F: Other:
Production Intermediate Liner Tubing d? Date: to w / sacks of cement. Date: Casing Leaks: Yes No Depth of casing leak(s): / sacks of cement Port Collar: w / sack of cement ch Set at: Feet	Gas Sto	-		
d? Date:	Production			
casing Leaks: Yes No Depth of casing leak(s):				
casing Leaks: Yes No Depth of casing leak(s):	d?		Da	te:
/ sacks of cement Port Collar: w / sack of cement ch Set at: Feet	to	(bottom) W /	sacks of cement. Da	te:
ch Set at: Feet	Casing Leaks:	Yes No Depth of	casing leak(s):	
ch Set at: Feet	/ sack	s of cement Port Coll	ar: w /	sack of cement
Plug Back Method:			(
	_ Plug Back Meth	od:		
Completion Information		•		_
rforation Interval to Feet or Open Hole Interval to Feet rforation Interval to Feet or Open Hole Interval to Feet				

Submitted Electronically

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:



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, Chairperson Dwight D. Keen, Commissioner Susan K. Duffy, Commissioner

February 24, 2021

JIM THWEATT Trimble & Maclaskey Oil LLC 110 SOUTH ST PO BOX 171 GRIDLEY, KS 66852-0171

Re: Temporary Abandonment API 15-207-19275-00-00 STEVENSON 8 NW/4 Sec.05-24S-14E Woodson County, Kansas

Dear JIM THWEATT:

"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 02/24/2022.

- * 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 02/24/2022.

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

Very truly yours,

Ryan Duling E.C.R.S."