## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License#                    |            |                    |            | API No. 15           |              |                            |      |           |  |                           |           |         |     |   |              |              |       |   |  |
|---------------------------------------|------------|--------------------|------------|----------------------|--------------|----------------------------|------|-----------|--|---------------------------|-----------|---------|-----|---|--------------|--------------|-------|---|--|
| Name:                                 |            |                    |            | Spot Description:    |              |                            |      |           |  |                           |           |         |     |   |              |              |       |   |  |
| Address 1:                            |            |                    |            | Sec Twp S. R 🗌 E 🗌 W |              |                            |      |           |  |                           |           |         |     |   |              |              |       |   |  |
| Address 2:                            |            |                    |            |                      |              | feet from N /              |      |           |  |                           |           |         |     |   |              |              |       |   |  |
| City:   Zip:   +      Contact Person: |            |                    |            |                      |              |                            |      |           |  |                           |           |         |     |   |              |              |       |   |  |
|                                       |            |                    |            |                      |              |                            |      |           |  | Field Contact Person Phon | e:()      |         |     | SWD Permit #: ENHR Permit #:                    |              |              |       |   |  |
|                                       |            |                    |            |                      |              |                            |      |           |  |                           | · · · · · |         |     | Gas Storage Permit #:  Spud Date: Date Shut-In: |              |              |       |   |  |
|                                       |            |                    |            |                      |              |                            |      |           |  |                           | 1         |         |     | Spud Date.                                      |              | Date Shut-In |       |   |  |
|                                       |            |                    |            |                      |              |                            |      |           |  |                           | Conductor | Surface | Pro | duction   | Intermediate | Liner        | Tubin | g |  |
| Size                                  |            |                    |            |                      |              |                            |      |           |  |                           |           |         |     |   |              |              |       |   |  |
| Setting Depth                         |            |                    |            |                      |              |                            |      |           |  |                           |           |         |     |   |              |              |       |   |  |
| Amount of Cement                      |            |                    |            |                      |              |                            |      |           |  |                           |           |         |     |   |              |              |       |   |  |
| Top of Cement                         |            |                    |            |                      |              |                            |      |           |  |                           |           |         |     |   |              |              |       |   |  |
| Bottom of Cement                      |            |                    |            |                      |              |                            |      |           |  |                           |           |         |     |   |              |              |       |   |  |
| Casing Fluid Level from Su            | rface:     | How D              | etermined? |                      |              | Da                         | te:  |           |  |                           |           |         |     |   |              |              |       |   |  |
| Casing Squeeze(s):                    | to w       | / sacks of c       | ement,     | to                   | (hottom) w / | sacks of cement. Da        | te:  |           |  |                           |           |         |     |   |              |              |       |   |  |
| Do you have a valid Oil & G           |            |                    |            | (100)                | (Dollom)     |                            |      |           |  |                           |           |         |     |   |              |              |       |   |  |
|                                       | in Hole at | Tools in Hole at   | Ca         | sing Leaks           |              | th of casing leak(s):      |      |           |  |                           |           |         |     |   |              |              |       |   |  |
|                                       |            |                    |            |                      |              | th of casing leak(s):      |      |           |  |                           |           |         |     |   |              |              |       |   |  |
|                                       |            |                    |            |                      |              | Collar: w /                | sack | of cement |  |                           |           |         |     |   |              |              |       |   |  |
| Packer Type:                          | Size:      |                    | Inch       | Set at:              | Fe           | eet                        |      |           |  |                           |           |         |     |   |              |              |       |   |  |
| Total Depth:                          | Plug Ba    | ck Depth:          |            | Plug Back Meth       | od:          |                            |      |           |  |                           |           |         |     |   |              |              |       |   |  |
| Geological Date:                      |            |                    |            |                      |              |                            |      |           |  |                           |           |         |     |   |              |              |       |   |  |
| Formation Name                        | Formation  | Top Formation Base |            |                      | Completio    | on Information             |      |           |  |                           |           |         |     |   |              |              |       |   |  |
| 1                                     | At:        | to Fee             | et Perfo   | ration Interval      | to F         | Feet or Open Hole Interval | to   | Feet      |  |                           |           |         |     |   |              |              |       |   |  |
| 2                                     | At:        | to Fee             | et Perfo   | ration Interval -    | to F         | Feet or Open Hole Interval | to   | Feet      |  |                           |           |         |     |   |              |              |       |   |  |
|                                       |            |                    |            |                      |              |                            |      | EDGE      |  |                           |           |         |     |   |              |              |       |   |  |

## Submitted Electronically

| Do NOT Write in This<br>Space - KCC USE ONLY | Date Tested: | Results:  | Date Plugged: | Date Repaired: | Date Put Back in Service: |
|--|--------------|-----------|---------------|----------------|---------------------------|
| Review Completed by:                         |              | Comments: |               |                |                           |
| TA Approved: 🗌 Yes 🗌 [                       | Denied Date: |           |               |                |                           |

## 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 |
| Image: Note of the state     Image: | KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720                            | Phone 620.902.6450 |
| And An And And And And And And And And A   | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651                      | Phone 785.261.6250 |



Phone: 620-682-7933 http://kcc.ks.gov/

Andrew J. French, Chairperson Dwight D. Keen, Commissioner Susan K. Duffy, Commissioner Laura Kelly, Governor

March 04, 2021

Lisa Jones Pantera Energy Company 817 S POLK ST STE 201 AMARILLO, TX 79101-3433

Re: Temporary Abandonment API 15-175-21413-00-02 SANTA FE E 1 NW/4 Sec.06-32S-33W Seward County, Kansas

Dear Lisa Jones:

"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 03/04/2022.

\* 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 03/04/2022.

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

Very truly yours,

Michael Maier"