## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License#            |                              |              |            | API No. 15-          | API No. 15 Spot Description:  |                            |        |         |  |  |
|-------------------------------|------------------------------|--------------|------------|----------------------|---|----------------------------|--------|---------|--|--|
|                               |                              |              |            | Spot Descr           |   |                            |        |         |  |  |
| Address 1:                    |                              |              |            |                      | Se  | ec Twp S. R                |        | ] E 🗌 W |  |  |
| Address 2:                    |                              |              |            |                      |   | feet from N                |        |         |  |  |
| City:                         | State:                       | Zip:         | +          |                      | GPS Location: Lat:, Long:   |                            |        |         |  |  |
| Contact Person:               |                              |              |            |                      | GPS Location: Lat:  |                            |        |         |  |  |
|                               |                              |              |            |                      |   |                            |        |         |  |  |
| Contact Person Email:         |                              |              |            | Lagas Nam            |   | Well                       |        |         |  |  |
| Field Contact Person:         |                              |              |            | Well Type: (         | Well Type: (check one)         Oil         Gas         OG         WSW         Other:           SWD Permit #:         ENHR Permit #: |                            |        |         |  |  |
| Field Contact Person Phone:   | ( )                          |              |            |                      |   |                            |        |         |  |  |
|                               | ()                           |              |            | Gas Sto              |   |                            |        |         |  |  |
|                               |                              |              |            | Spud Date:           |   | Date Shut-In:              |        |         |  |  |
|                               | Conductor                    | Surfa        | ce         | Production           | Intermedia  | ate Liner                  | Tubing | g       |  |  |
| Size                          |                              |              |            |                      |   |                            |        |         |  |  |
| Setting Depth                 |                              |              |            |                      |   |                            |        |         |  |  |
| Amount of Cement              |                              |              |            |                      |   |                            |        |         |  |  |
| Top of Cement                 |                              |              |            |                      |   |                            |        |         |  |  |
| Bottom of Cement              |                              |              |            |                      |   |                            |        |         |  |  |
| Casing Fluid Level from Surfa | ace:                         |              | How Deterr | nined?               |   | Da                         | ate:   |         |  |  |
|                               |                              |              |            |                      |   | sacks of cement. D         | ate:   |         |  |  |
| Do you have a valid Oil & Ga  | s Lease? Yes                 | No           |            |                      |   |                            |        |         |  |  |
| Depth and Type: 🗌 Junk in     | Hole at                      | Tools in Hol | e at       | Casing Leaks:        | Yes No  | Depth of casing leak(s):   |        |         |  |  |
|                               |                              |              |            |                      |   | Port Collar: w /           |        |         |  |  |
| Packer Type:                  |                              |              | •••        |                      |   | ,                          |        |         |  |  |
|                               | Plug Back Depth:             |              |            |                      |   |                            |        |         |  |  |
| Geological Date:              |                              |              |            |                      |   |                            |        |         |  |  |
| Formation Name                | Formation Top Formation Base |              |            |                      | Completion Information  |                            |        |         |  |  |
| 1                             | At:                          | to           | Feet       | Perforation Interval | to  | Feet or Open Hole Interval | to     | Feet    |  |  |
|                               |                              |              |            |                      |   |                            |        |         |  |  |

## 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 🗌 De                      | nied Date:   |           |               |                |                           |

## Mail to the Appropriate KCC Conservation Office:

| There have been any the an and first many made and the horizon  | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801               | Phone 620.682.7933 |
|---|--|--------------------|
| Norm         Norm <td< th=""><td>KCC District Office #2 - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226</td><td>Phone 316.337.7400</td></td<> | 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 |



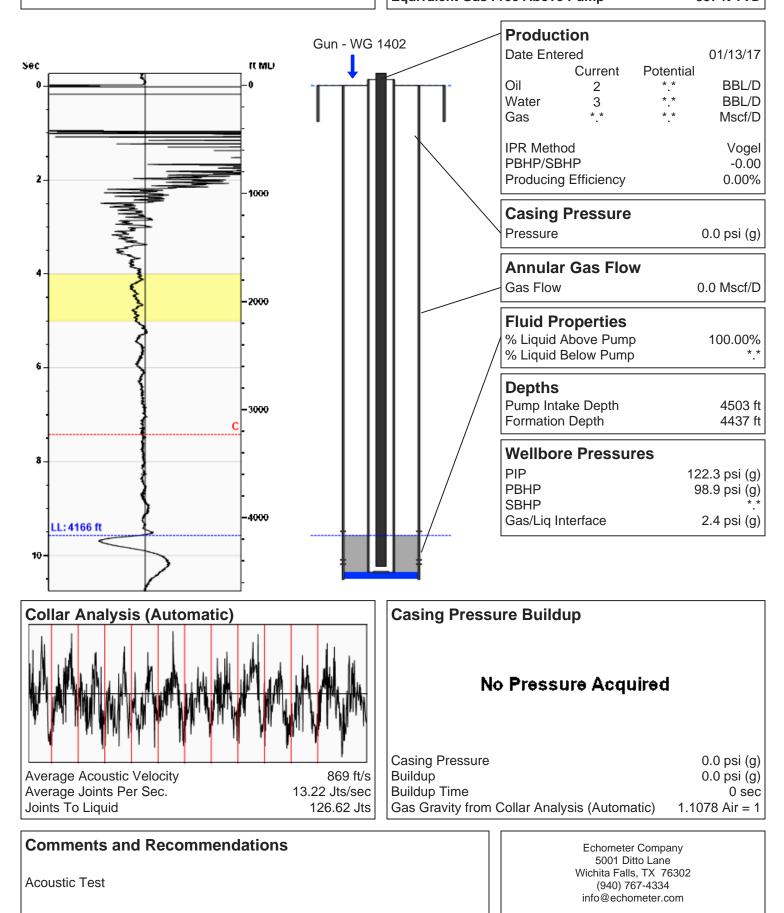
**Liquid Level** 

KARL 1 03/08/2021 10:37:18AM

4166 ft MD

Fluid Above Pump Equivalent Gas Free Above Pump







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

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

March 17, 2021

CYNDE WOLF Petroleum Property Services, Inc. 125 N MARKET SUITE 1251 WICHITA, KS 67202-1719

Re: Temporary Abandonment API 15-101-20832-00-00 KARL 1-30 NE/4 Sec.30-16S-29W Lane County, Kansas

Dear CYNDE WOLF:

"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 03/17/2022.

\* 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 03/17/2022.

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

Very truly yours,

Michael Maier"