## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

All blanks must be complete

# TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License#          |                              |                  |              |                        | API No. 15-  |                  |             |                     |          |        |      |
|-----------------------------|------------------------------|------------------|--------------|------------------------|--|------------------|-------------|---------------------|----------|--------|------|
| Name:                       |                              |                  |              |                        | Spot Description:  |                  |             |                     |          |        |      |
|                             |                              |                  |              |                        | Sec Twp S. R [] E [] W   |                  |             |                     |          |        |      |
| Address 2:                  |                              |                  |              |                        |  |                  |             | feet from N         |          |        |      |
| City: State: Zip: +         |                              |                  |              |                        | feet from L E / L W Line of Section  |                  |             |                     |          |        |      |
| Contact Person:             |                              |                  |              |                        | GPS Location: Lat:, Long:, Long:, Datum: NAD27 NAD83 WGS84<br>County: Elevation: GL KB |                  |             |                     |          |        |      |
|                             |                              |                  |              |                        |  |                  |             |                     |          |        |      |
| Field Contact Person:       |                              |                  |              |                        | Well Type: (   | check one) 🗌     | Oil Gas     | OG WSW              | Other: _ |        |      |
| Field Contact Person Phone  |                              |                  |              |                        | SWD Permit #: ENHR Permit #:   |                  |             |                     |          |        |      |
|                             |                              |                  |              |                        |  | rage Permit #: _ |             | Date Shut-In:       |          |        |      |
|                             |                              |                  |              |                        |  |                  |             |                     |          |        |      |
|                             | Conductor                    | Surfa            | ice          | Pro                    | duction  | Intermedi        | iate        | Liner               | _        | Tubing |      |
| Size                        |                              |                  |              |                        |  |                  |             |                     |          |        |      |
| Setting Depth               |                              |                  |              |                        |  |                  |             |                     |          |        |      |
| Amount of Cement            |                              |                  |              |                        |  |                  |             |                     |          |        |      |
| Top of Cement               |                              |                  |              |                        |  |                  |             |                     |          |        |      |
| Bottom of Cement            |                              |                  |              |                        |  |                  |             |                     |          |        |      |
| Casing Fluid Level from Su  | rface:                       |                  | How Dete     | rmined?                |  |                  |             | D                   | ate:     |        |      |
| Casing Squeeze(s):          | to w                         | /                | sacks of cem | ent,                   | to   | (bottom) w /     |             | sacks of cement. D  | ate:     |        |      |
| Do you have a valid Oil & G | as Lease? 🗌 Yes              | No               |              |                        |  |                  |             |                     |          |        |      |
| Depth and Type: 🗌 Junk      | in Hole at                   | Tools in Ho      | le at        | Cas                    | sing Leaks:  | Yes 🗌 No         | Depth of ca | asing leak(s):      |          |        |      |
| Type Completion:            |                              |                  |              |                        |  |                  |             |                     |          |        |      |
| Packer Type:                |                              |                  |              |                        |  |                  |             | (depth)             |          |        |      |
| Total Depth:                | Plug B                       | Plug Back Depth: |              |                        | Plug Back Method:  |                  |             |                     |          |        |      |
| Geological Date:            |                              |                  |              |                        |  |                  |             |                     |          |        |      |
| Formation Name              | Formation Top Formation Base |                  |              | Completion Information |  |                  |             |                     |          |        |      |
| 1                           | At:                          | to               | Feet         | Perfor                 | ation Interval   | to               | Feet o      | r Open Hole Interva | I        | to     | Feet |
| 2                           | At:                          | to               | Feet         | Perfor                 | ation Interval -   | to               | Feet o      | r Open Hole Interva | I        | to     | Feet |
|                             |                              | сет ти ат ти     |              |                        |  |                  |             |                     |          |        | DOE  |
|                             |                              | c                |              |                        |  |                  |             |                     |          |        |      |

## 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                          | enied 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 |  |  |
|  | 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 |  |  |



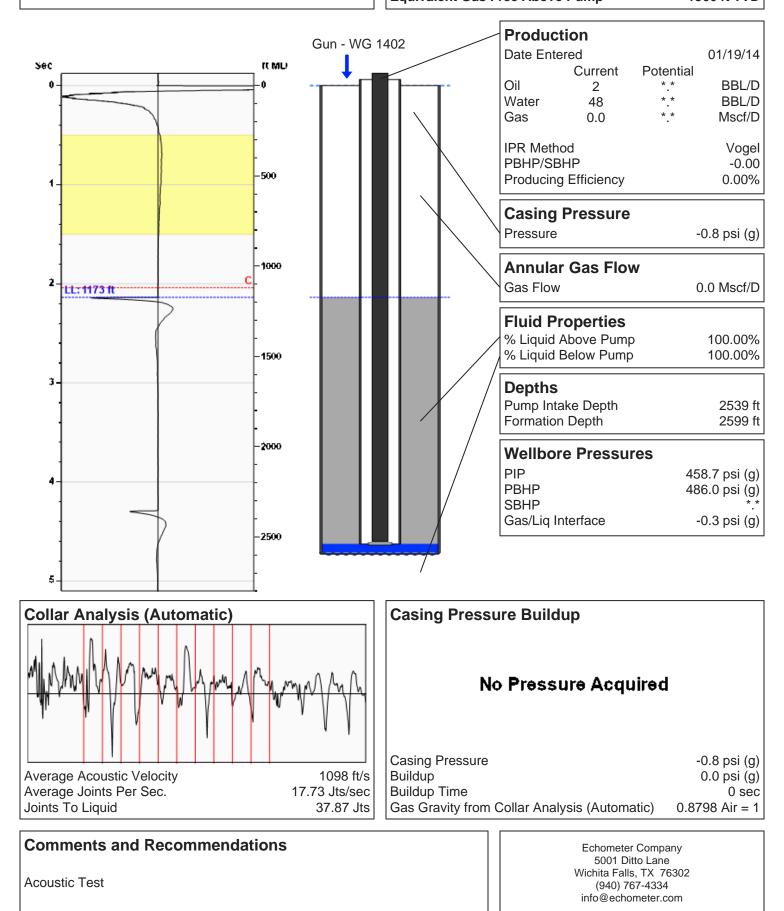
## EATON 2 03/23/2021 11:35:37AM

Liquid Level

1173 ft MD

Fluid Above Pump Equivalent Gas Free Above Pump

#### 1366 ft TVD 1366 ft TVD





Phone: 316-337-7400 Fax: 316-630-4005 http://kcc.ks.gov/

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

April 06, 2021

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

Re: Temporary Abandonment API 15-015-01127-00-00 EATON A 2 SE/4 Sec.22-25S-04E Butler 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 04/06/2022.

\* 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 04/06/2022.

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

Very truly yours,

Neal Rupp ECRS"