KOLAR Document ID: 1574069

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

July 2017
Form must be Typed
Form must be signed
All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License#                                |                    |  |         | API No. 15                |                      |  |                          |        |         |  |                                 |  |  |    |   |                              |  |  |  |  |  |
|---|--------------------|--|---------|---------------------------|----------------------|--|--------------------------|--------|---------|--|---------------------------------|--|--|----|---|------------------------------|--|--|--|--|--|
| Name:   |                    |  |         | Spot Desc                 | ription:             |  |                          |        |         |  |                                 |  |  |    |   |                              |  |  |  |  |  |
| Address 1:  |                    |  |         | _                         | Sec.                 | Twp  | S. R                     | [] E   | :w      |  |                                 |  |  |    |   |                              |  |  |  |  |  |
| Address 2:  |                    |  |         |                           |                      | feet from  |                          |        |         |  |                                 |  |  |    |   |                              |  |  |  |  |  |
| City:   | State:             | _ Zip:                                   | +       |                           |                      | feet from  |                          |        | Section |  |                                 |  |  |    |   |                              |  |  |  |  |  |
| Contact Person:                                   |                    |  |         |                           | GPS Location: Lat:   |  |                          |        |         |  |                                 |  |  |    |   |                              |  |  |  |  |  |
|   |                    |  |         |                           |                      |  |                          |        |         |  | Field Contact Person:           |  |  | '' | Well Type: (check one)  Oil  Gas  OG  WSW  Other: |                              |  |  |  |  |  |
|   |                    |  |         |                           |                      |  |                          |        |         |  | Field Contact Person Phone: ( ) |  |  |    |   | SWD Permit #: ENHR Permit #: |  |  |  |  |  |
|   | ,                  |  |         | ☐ Gas St                  | orage Permit #:<br>: | Date Shut-   | ln:                      |        |         |  |                                 |  |  |    |   |                              |  |  |  |  |  |
|   | Conductor          | Surface                                  |         | Production                | Intermediate         | Liner  |                          | Tubing |         |  |                                 |  |  |    |   |                              |  |  |  |  |  |
| Size  |                    |  |         |                           |                      |  |                          |        |         |  |                                 |  |  |    |   |                              |  |  |  |  |  |
| Setting Depth                                     |                    |  |         |                           |                      |  |                          |        |         |  |                                 |  |  |    |   |                              |  |  |  |  |  |
| Amount of Cement                                  |                    |  |         |                           |                      |  |                          |        |         |  |                                 |  |  |    |   |                              |  |  |  |  |  |
| Top of Cement                                     |                    |  |         |                           |                      |  |                          |        |         |  |                                 |  |  |    |   |                              |  |  |  |  |  |
| Bottom of Cement                                  |                    |  |         |                           |                      |  |                          |        |         |  |                                 |  |  |    |   |                              |  |  |  |  |  |
| Casing Fluid Level from Surfa  Casing Squeeze(s): | to w               | / sack  No Tools in Hole at of: DV Tool: | (depth) | Casing Leaks: [ w / sack  | w / w /              | sacks of cements sacks sacks of cements sacks sac | nent. Date:              |        |         |  |                                 |  |  |    |   |                              |  |  |  |  |  |
| Total Depth:                                      | Plug Ba            | ack Depth:                               |         | Plug Back Meth            | nod:                 |  |                          |        |         |  |                                 |  |  |    |   |                              |  |  |  |  |  |
| Geological Date:                                  | <b>.</b>           | T  |         |                           | 0 1                  |  |                          |        |         |  |                                 |  |  |    |   |                              |  |  |  |  |  |
| Formation Name                                    |                    | Top Formation Ba                         |         | Danie national later nati |                      | tion Information   | lata a sal               | 4-     | <b></b> |  |                                 |  |  |    |   |                              |  |  |  |  |  |
| 1   | At:                |  |         |                           |                      | Feet or Open Hole  |                          |        | _       |  |                                 |  |  |    |   |                              |  |  |  |  |  |
| Z   | At:                | to                                       | _ Feet  | Perforation Interval      | to                   | Feet or Open Hole  | Interval ———             | _ to   | Feet    |  |                                 |  |  |    |   |                              |  |  |  |  |  |
| IINDED DENALTY OF DED                             | IIIDV I HEDEBV ATT |  |         | Electronical              |                      | CORRECTTOTUE   | DECT OF MV I             | NOMI E | )CE     |  |                                 |  |  |    |   |                              |  |  |  |  |  |
| Do NOT Write in This<br>Space - KCC USE ONLY      |                    | Results:                                 |         | Date Plugged:             | Date Repaired:       | Date Put Bac   | ate Put Back in Service: |        |         |  |                                 |  |  |    |   |                              |  |  |  |  |  |
| Review Completed by:                              |                    |  | (       | Comments:                 |                      |  |                          |        |         |  |                                 |  |  |    |   |                              |  |  |  |  |  |
| TA Approved: Yes                                  | Denied Date:       |  |         |                           |                      |  |                          |        |         |  |                                 |  |  |    |   |                              |  |  |  |  |  |
|   |                    |  |         |                           |                      |  |                          |        |         |  |                                 |  |  |    |   |                              |  |  |  |  |  |

## Mail to the Appropriate KCC Conservation Office:

| Notes byte tree to the total and foots the total states that the total states the total sta | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801               | Phone 620.682.7933 |  |
|--|--|--------------------|--|
| The last the | 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 |  |
| Similar Date Note (see process for the page form took themselves the page for the pag | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651                      | Phone 785.261.6250 |  |

ECHOMETER COMPANY 5001 DITTO LANE, WICHITA FALLS, 1243 78302  Conservation Division District Office No. 4 2301 E. 13th Street Hays, KS 67601-2651



Phone: 785-261-6250 Fax: 785-625-0564 http://kcc.ks.gov/

Laura Kelly, Governor

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

May 24, 2021

Mary Castoreno Osborn Heirs Company, LTD PO BOX 17968 SAN ANTONIO, TX 78217-0968

Re: Temporary Abandonment API 15-009-24668-00-00 KINZEL 9 SE/4 Sec.02-18S-12W Barton County, Kansas

## Dear Mary Castoreno:

Your application for Temporary Abandonment (TA) for the above-listed well is denied for the following reasons(s):

## **High Fluid Level**

Pursuant to K.A.R. 82-3-111, the well must be plugged, or returned to service, or obtain temporary abandonment status by 06/23/2021.

This deadline does NOT override any compliance deadline given to you in any Commission Order.

You may contact me if you have any questions.

Sincerely, RICHARD WILLIAMS KCC DISTRICT 4