

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License# _____
 Name: _____
 Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Contact Person: _____
 Phone: (_____) _____
 Contact Person Email: _____
 Field Contact Person: _____
 Field Contact Person Phone: (_____) _____

API No. 15- _____
 Spot Description: _____
 _____ - _____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ E W
 _____ feet from N / S Line of Section
 _____ feet from E / W Line of Section
 GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)
 Datum: NAD27 NAD83 WGS84
 County: _____ Elevation: _____ GL KB
 Lease Name: _____ Well #: _____
 Well Type: (check one) Oil Gas OG WSW Other: _____
 SWD Permit #: _____ ENHR Permit #: _____
 Gas Storage Permit #: _____
 Spud Date: _____ Date Shut-In: _____

| | Conductor | Surface | Production | Intermediate | Liner | Tubing |
|------------------|-----------|---------|------------|--------------|-------|--------|
| Size | | | | | | |
| Setting Depth | | | | | | |
| Amount of Cement | | | | | | |
| Top of Cement | | | | | | |
| Bottom of Cement | | | | | | |

Casing Fluid Level from Surface: _____ How Determined? _____ Date: _____
 Casing Squeeze(s): _____ to _____ w / _____ sacks of cement, _____ to _____ w / _____ sacks of cement. Date: _____
(top) (bottom) (top) (bottom)
 Do you have a valid Oil & Gas Lease? Yes No
 Depth and Type: Junk in Hole at _____ Tools in Hole at _____ Casing Leaks: Yes No Depth of casing leak(s): _____
(depth) (depth)
 Type Completion: ALT. I ALT. II Depth of: DV Tool: _____ w / _____ sacks of cement Port Collar: _____ w / _____ sack of cement
(depth) (depth)
 Packer Type: _____ Size: _____ Inch Set at: _____ Feet
 Total Depth: _____ Plug Back Depth: _____ Plug Back Method: _____

Geological Data:

| Formation Name | Formation Top | Formation Base | Completion Information |
|----------------|---------------|----------------|--|
| 1. _____ | At: _____ | to _____ Feet | Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet |
| 2. _____ | At: _____ | to _____ Feet | Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet |

UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

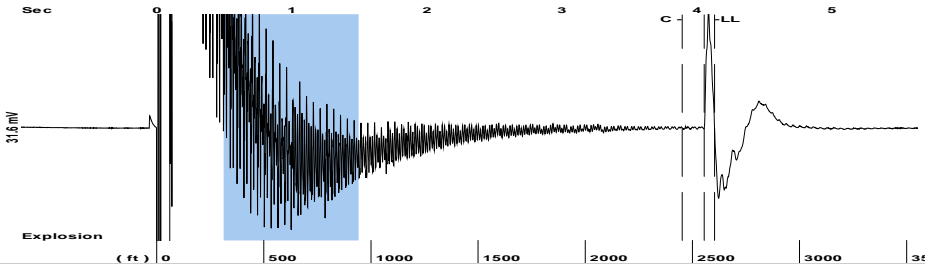
Submitted Electronically

| | | | | | |
|---|--|----------------|---------------------|----------------------|---------------------------------|
| 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: <input type="checkbox"/> Yes <input type="checkbox"/> Denied Date: _____ | | | | | |

Mail to the Appropriate KCC Conservation Office:

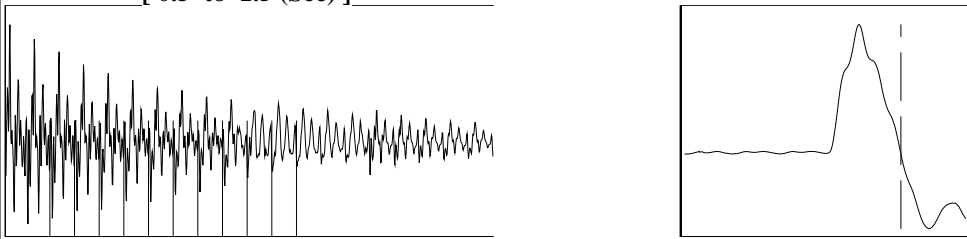
| | | |
|--|--|--------------------|
|  | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801 | Phone 620.682.7933 |
| | KCC District Office #2 - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226 | Phone 316.337.7400 |
| | KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720 | Phone 620.902.6450 |
| | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651 | Phone 785.261.6250 |

Group: TYRONE WELLS Well: GOULD FM 2-5 (acquired on: 07/21/21 12:35:11)



Filter Type High Pass Automatic Collar Count Yes Time 4.132 sec
 Manual Acoustic Velo 1245.06 ft/s Manual JTS/sec 19.7628 Joints 82.64 Jts
 Depth 2603.16 ft

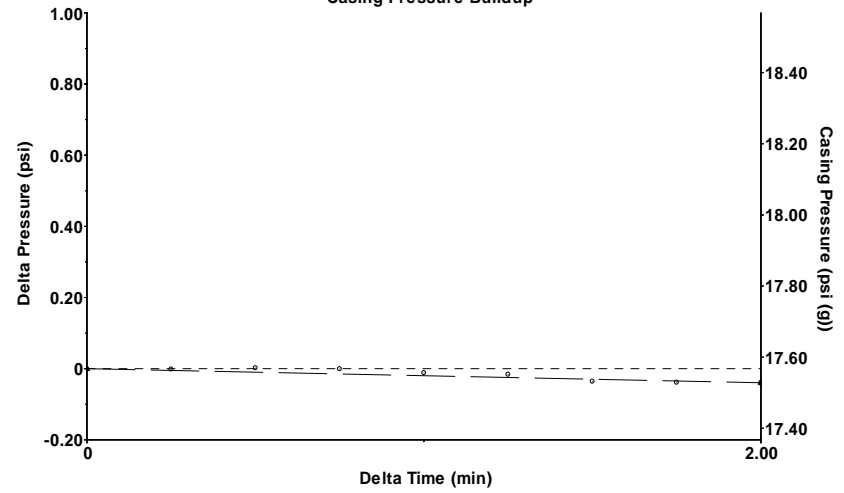
[0.5 to 1.5 (Sec)]



Analysis Method: Automatic

Group: TYRONE WELLS Well: GOULD FM 2-5 (acquired on: 07/21/21 12:35:11)

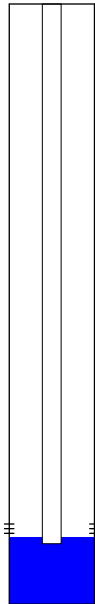
Casing Pressure Buildup



Change in Pressure -0.04 psi PT17372
 Change in Time 2.00 min Range 0 - ? psi

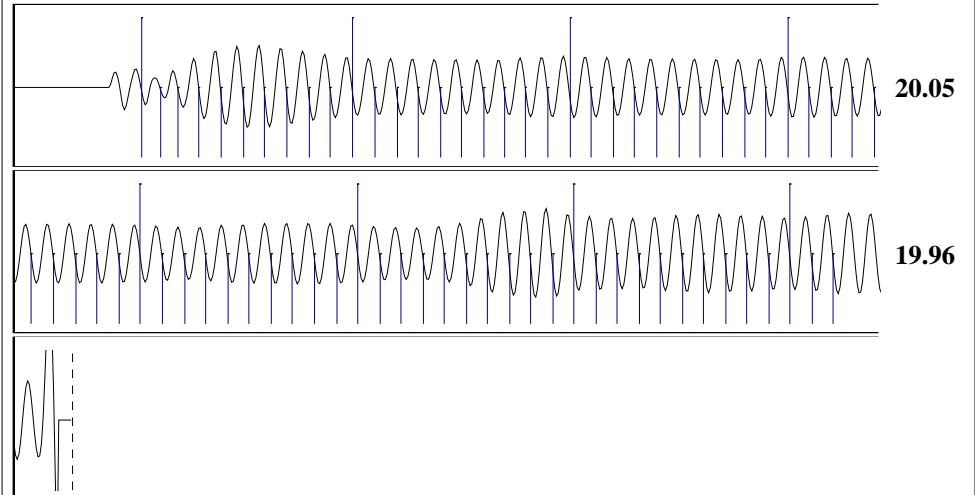
Group: TYRONE WELLS Well: GOULD FM 2-5 (acquired on: 07/21/21 12:35:11)

| | | |
|-----------------------|--------------|-------------------------------|
| Production | | Casing Pressure |
| Current | Potential | 17.6 psi (g) |
| Oil - * - | - * - BBL/D | Casing Pressure Buildup |
| Water - * - | - * - BBL/D | -0.040 psi |
| Gas - * - | - * - Mscf/D | 2.00 min |
| IPR Method | Vogel | Gas/Liquid Interface Pressure |
| PBHP/SBHP | - * - | 19.7 psi (g) |
| Production Efficiency | 0.0 | Liquid Level Depth |
| Oil 40 deg.API | | 2603.16 ft |
| Water 1.05 Sp.Gr.H2O | | Pump Intake Depth |
| Gas 0.75 Sp.Gr.AIR | | 2640.00 ft |
| Acoustic Velocity | 1260 ft/s | Formation Depth |
| | | 2555.00 ft |



Static
 Oil Column Height MD 0 ft
 Water Column Height MD - * - ft
 Static BHP 19.7 psi (g)

Group: TYRONE WELLS Well: GOULD FM 2-5 (acquired on: 07/21/21 12:35:11)



| | | | |
|------------------------|------------|------------------------|-----------------|
| Acoustic Velocity | 1260 ft/s | Joints counted | 72 |
| Joints Per Second | 20 jts/sec | Joints to liquid level | 82.64 |
| Depth to liquid level | 2603.16 ft | Filter Width | 17.7628 21.7628 |
| Automatic Collar Count | Yes | Time to 1st Collar | 0.292 3.892 |

August 05, 2021

Liv Adams
XTO Energy Inc.
210 PARK AVE STE 2350
OKLAHOMA CITY, OK 73102-5683

Re: Temporary Abandonment
API 15-055-21569-00-00
F M GOULD 2-5
SW/4 Sec.05-23S-32W
Finney County, Kansas

Dear Liv Adams:

"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 08/05/2022.

- * 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 08/05/2022.

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

Very truly yours,

Michael Maier"