### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

All blanks must be complete

# TEMPORARY ABANDONMENT WELL APPLICATION

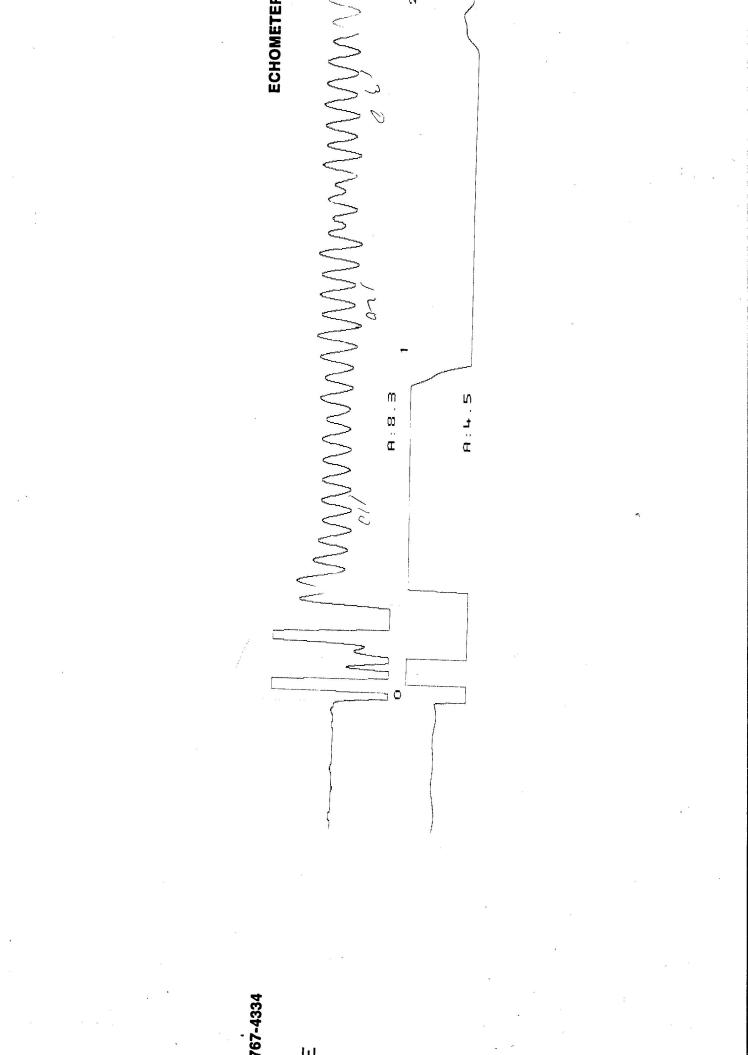
| OPERATOR: License#                                    |                                   |             |                |          | API No. 15             |                  |               |                   |        |        |         |
|-------------------------------------------------------|-----------------------------------|-------------|----------------|----------|------------------------|------------------|---------------|-------------------|--------|--------|---------|
| Name:                                                 |                                   |             |                |          | Spot Description:      |                  |               |                   |        |        |         |
| Address 1:                                            |                                   |             |                |          |                        | Se               | ec 1          | īwp S.            | R      | E      | E 🗌 W   |
| Address 2:                                            |                                   |             |                |          |                        |                  |               | feet from N       |        |        |         |
| City:   State:  Zip:  +    Contact Person:     Phone: |                                   |             |                |          |                        |                  |               |                   |        |        |         |
|                                                       |                                   |             |                |          |                        |                  |               |                   |        |        |         |
|                                                       |                                   |             |                |          |                        |                  |               |                   |        |        |         |
| Contact Person Email:                                 |                                   |             |                |          |                        |                  |               | Wel               |        |        |         |
| Field Contact Person:                                 |                                   |             |                |          |                        |                  |               | og 🗌 wsw 🗌        |        |        |         |
| Field Contact Person Phon                             |                                   |             |                |          |                        |                  |               | ENHR Perr         | nit #: |        |         |
|                                                       | ()                                |             |                |          |                        | rage Permit #: _ |               |                   |        |        |         |
|                                                       |                                   |             |                |          | Spud Date:             |                  |               | Date Shut-In:     |        |        |         |
|                                                       | Conductor                         | Surfa       | ce             | Produ    | iction                 | Intermedi        | ate           | Liner             |        | Tubing |         |
| Size                                                  |                                   |             |                |          |                        |                  |               |                   |        |        |         |
| Setting Depth                                         |                                   |             |                |          |                        |                  |               |                   |        |        |         |
| Amount of Cement                                      |                                   |             |                |          |                        |                  |               |                   |        |        |         |
| Top of Cement                                         |                                   |             |                |          |                        |                  |               |                   |        |        |         |
| Bottom of Cement                                      |                                   |             |                |          |                        |                  |               |                   |        |        |         |
| Casing Fluid Level from Su                            | rface:                            |             | How Determ     | nined?   |                        |                  |               | Γ                 | Date:  |        |         |
| Casing Squeeze(s):                                    | to w                              | /           | sacks of cemer | nt,      | <i>op)</i> to          | (bottom) w /     | Sá            | acks of cement.   | Date:  |        |         |
| Do you have a valid Oil & G                           | as Lease? 🗌 Yes                   | No          |                |          |                        |                  |               |                   |        |        |         |
| Depth and Type: Unk                                   | in Hole at                        | Tools in Ho | e at           | Casir    | ng Leaks:              | Yes No           | Depth of casi | ng leak(s):       |        |        |         |
| Type Completion:                                      |                                   |             |                |          |                        |                  |               |                   |        |        | fcement |
|                                                       |                                   |             |                |          |                        |                  |               | (depth)           |        |        | comon   |
| Packer Type:                                          | Size: _                           |             |                | Inch Se  | et at:                 |                  | Feet          |                   |        |        |         |
| Total Depth:                                          | Plug Ba                           | ack Depth:  |                | Plu      | Plug Back Method:      |                  |               |                   |        |        |         |
| Geological Date:                                      |                                   |             |                |          |                        |                  |               |                   |        |        |         |
|                                                       | Name Formation Top Formation Base |             |                |          | Completion Information |                  |               |                   |        |        |         |
| Formation Name                                        |                                   |             |                |          |                        | 1-               | Foot or (     | Open Hole Interva |        | to     | East    |
| Formation Name                                        |                                   | to          | Feet           | Perforat | ion Interval _         | to               |               |                   |        | 10     | Feel    |

## Submitted Electronically

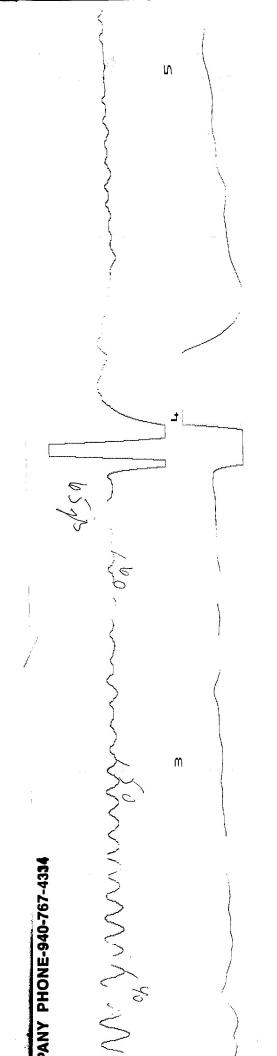
| Do NOT Write in This<br>Space - KCC USE ONLY | Date Tested: | Results:  | Date Plugged: | Date Repaired: | Date Put Back in Service: |
|----------------------------------------------|--------------|-----------|---------------|----------------|---------------------------|
| Review Completed by:                         |              | 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 |



hi





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

August 19, 2021

D S LANGSTON Langston Oil & Gas LLC 310 W CENTRAL AVE STE 202 WICHITA, KS 67202-1004

Re: Temporary Abandonment API 15-159-22754-00-00 REIF 31-2 SW/4 Sec.31-18S-10W Rice County, Kansas

Dear D S LANGSTON:

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

#### Incorrect Shut in Date. Last recorded oil sale Dec. 2019

Pursuant to K.A.R. 82-3-111, the well must be plugged, or returned to service, or obtain temporary abandonment status by 09/18/2021.

# 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, Keith Karlin ECRS KCC DISTRICT 2