KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form CP-111 July 2017 Form must be Typed Form must be signed

## TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

Phone 620.902.6450

Phone 785.261.6250

| OPERATOR: License#   |                          |  |                   |                               |  | API No. 15-   |  |                                      |  |  |  |                  |           |       |     |     |            |              |               |        |
|--|--------------------------|--|-------------------|-------------------------------|--|---|--|--------------------------------------|--|--|--|------------------|-----------|-------|-----|-----|------------|--------------|---------------|--------|
| Name:  |                          | Spot Description:  |                   |                               |  |   |  |                                      |  |  |  |                  |           |       |     |     |            |              |               |        |
| Address 1:   |                          |  |                   |                               |  | •   |  | R                                    |  |  |  |                  |           |       |     |     |            |              |               |        |
| Address 2:   |                          |  |                   |                               |  |   | feet from N  | I / S Line of Section                |  |  |  |                  |           |       |     |     |            |              |               |        |
| City:       State:       Zip:       +         Contact Person:            |                          |  |                   |                               |  | GPS Location:         Lat:  |  |                                      |  |  |  |                  |           |       |     |     |            |              |               |        |
|  |                          |  |                   |                               |  |   |  |                                      |  |  |  |                  |           |       |     |     | Spud Date: |              | Date Shut-In: |        |
|  |                          |  |                   |                               |  |   |  |                                      |  |  |  |                  | Conductor | Surfa | ace | Pro | oduction   | Intermediate | Liner         | Tubing |
|  |                          |  |                   |                               |  |   |  |                                      |  |  |  | Size             |           |       |     |     |            |              |               |        |
|  |                          |  |                   |                               |  |   |  |                                      |  |  |  | Setting Depth    |           |       |     |     |            |              |               |        |
|  |                          |  |                   |                               |  |   |  |                                      |  |  |  | Amount of Cement |           |       |     |     |            |              |               |        |
|  |                          |  |                   |                               |  |   |  |                                      |  |  |  | Top of Cement    |           |       |     |     |            |              |               |        |
| Bottom of Cement   |                          |  |                   |                               |  |   |  |                                      |  |  |  |                  |           |       |     |     |            |              |               |        |
| Casing Squeeze(s):  (top)  Do you have a valid Oil & Ga  Depth and Type: | As Lease? Yes  I Hole at | No Tools in Ho th of: DV Too Back Depth:  on Top Formatic to  to  to | on Base Feet Feet | Ca  W / _  Inch  Perfo  Perfo | sing Leaks: sack: Set at: Plug Back Meth ration Interval | Yes No Depth s of cement Port ( Fee  od:  Completion to Fee  to Fee | n of casing leak(s): w / Collar: w / et n Information eet or Open Hole Interva | sack of cement al to Feet al to Feet |  |  |  |                  |           |       |     |     |            |              |               |        |
|  |                          |  | Submitte          | ed Ele                        | ctronicall   | У   |  |                                      |  |  |  |                  |           |       |     |     |            |              |               |        |
| Do NOT Write in This<br>Space - KCC USE ONLY                             |                          |  |                   | sults:                        | Date Plugged: Date Repaired: Date Put Back in Service:   |   |  |                                      |  |  |  |                  |           |       |     |     |            |              |               |        |
| Review Completed by:   |                          |  |                   | _ Comn                        | nents:   |   |  |                                      |  |  |  |                  |           |       |     |     |            |              |               |        |
| TA Approved: Yes   | Denied Da                | te:  |                   |                               |  |   |  |                                      |  |  |  |                  |           |       |     |     |            |              |               |        |
|  |                          | Mail   | to the Appr       | opriate                       | KCC Conserv  | ation Office:   |  |                                      |  |  |  |                  |           |       |     |     |            |              |               |        |
| Share State State State State State State States Salary States           | KCC D                    | KCC District Office #1 - 210 E. Frontview, Sui                       |                   |                               |  | ty, KS 67801  | Phone 620.682.7933   |                                      |  |  |  |                  |           |       |     |     |            |              |               |        |
|  | KCC D                    | KCC District Office #2 - 3450 N. Rock Road,                          |                   |                               |  | Suite 601, Wichita, KS  | Phone 316.337.7400   |                                      |  |  |  |                  |           |       |     |     |            |              |               |        |

KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720

KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651

|    | 4334 ECHOMETER COMPANY PHONE-940-7 |                      | PRODUCTION RATE | CASING PRESSURE  |
|----|------------------------------------|----------------------|-----------------|--|
|    | =940-767-4334) ECHOMETER COMPANY   | MAX PRODUCTION       | SBHP            | JOINTS TO LIQUIDPBHP                                   |
| 20 | PHONE-940-767-4334                 | P-P 0 077 M: 6.2 12. | P-P 0,008 mV    | C9/07/2021 11:22:01 GE QUIET WELL LOWER COLLARS M: 7.4 |

DMETER COMPANY PHONE-940-767-4334

**ECHOMETER COMPANY PHONE-940-767-4334** 

**ECHOMETER COMPANY PHONE-94** 

Conservation Division District Office No. 2 3450 N. Rock Road Building 600, Suite 601 Wichita, KS 67226



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

Laura Kelly, Governor

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

September 08, 2021

Robin L. Austin Rama Operating Co., Inc. 101 S MAIN ST STAFFORD, KS 67578-1429

Re: Temporary Abandonment API 15-159-19181-00-00 WOLF 2 SE/4 Sec.20-19S-10W Rice County, Kansas

## Dear Robin L. Austin:

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 10/08/2021.

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