## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License#                       |               |                              |               | API No. 15-   | API No. 15  |              |                      |        |           |  |
|--|---------------|------------------------------|---------------|---|---|--------------|----------------------|--------|-----------|--|
| Name:                                    |               |                              |               | _ Spot Descri                                       | Spot Description:   |              |                      |        |           |  |
| Address 1:                               |               |                              |               | _   | Se  | C            | _ Twp S. R           |        | E 🗌 W     |  |
| Address 2:                               |               |                              |               | _   |   |              | feet from N /        | =      |           |  |
| City:                                    | State:        | Zip:                         | _ +           | - CPS Loootic                                       | feet from E / W Line of Section                                   |              |                      |        |           |  |
| Contact Person:                          |               |                              |               |   | GPS Location: Lat:, Long:, e.gxxx.xxxxx) Datum: NAD27 NAD83 WGS84 |              |                      |        |           |  |
| Phone:()                                 |               |                              |               |   |   |              | lion:                | GI     | КВ        |  |
| Contact Person Email:                    |               |                              |               |   |   |              | Well #:              |        |           |  |
| Field Contact Person:                    |               |                              |               | Well Type: (d                                       | check one) 🗌 (  | Dil 🗌 Gas    | OG WSW Ot            | her:   |           |  |
| Field Contact Person Phone:              | ()            |                              |               |   |   |              | ENHR Permit #        | t:     |           |  |
|  | ()            |                              |               | Gas Storage Permit #:      Spud Date: Date Shut-In: |   |              |                      |        |           |  |
|  |               |                              |               | Spud Date:  |   |              | _ Date Shut-In:      |        |           |  |
|  | Conductor     | Surface                      | 9             | Production  | Intermedia  | ate          | Liner                | Tubing | I         |  |
| Size                                     |               |                              |               |   |   |              |                      |        |           |  |
| Setting Depth                            |               |                              |               |   |   |              |                      |        |           |  |
| Amount of Cement                         |               |                              |               |   |   |              |                      |        |           |  |
| Top of Cement                            |               |                              |               |   |   |              |                      |        |           |  |
| Bottom of Cement                         |               |                              |               |   |   |              |                      |        |           |  |
| Casing Fluid Level from Surfa            | ICe:          |                              | How Determine | ed?   |   |              | Date                 | :      |           |  |
| Casing Squeeze(s):                       |               |                              |               |   |   |              |                      | :      |           |  |
| Do you have a valid Oil & Gas            | s Lease? Yes  | No                           |               |   |   |              |                      |        |           |  |
| Depth and Type: 🗌 Junk in                | Hole at       | Tools in Hole                | at            | Casing Leaks:                                       | Yes No  | Depth of ca  | asing leak(s):       |        |           |  |
| Type Completion:                         | ALT. II Depth | of: DV Tool:                 | (deptn)<br>W  | / sacks   | of cement   | Port Collar  | :w/                  | sack o | of cement |  |
| Packer Type:                             |               |                              |               |   |   |              | (depth)              |        |           |  |
| Total Depth:                             | Plug B        | ack Depth:                   |               | Plug Back Metho                                     | od:   |              | _                    |        |           |  |
|  |               |                              |               |   |   |              |                      |        |           |  |
| Geological Date:                         |               | Formation Top Formation Base |               |   | Completion Information  |              |                      |        |           |  |
| Ū  | Formatio      | n Top Formatior              | Base          |   | Com   | pletion inio | mation               |        |           |  |
| Geological Date:<br>Formation Name<br>1. |               |                              |               | erforation Interval _                               |   |              | r Open Hole Interval | to     | Feet      |  |

## Submitted Electronically

| <i>Do NOT Write in This<br/>Space -</i> KCC USE ONLY | Date Tested: | Results:  | Date Plugged: | Date Repaired: | Date Put Back in Service: |
|--|--------------|-----------|---------------|----------------|---------------------------|
| Review Completed by:                                 |              | Comments: |               |                |                           |
| TA Approved: 🗌 Yes 🗌 D                               | enied Date:  |           |               |                |                           |

## Mail to the Appropriate KCC Conservation Office:

| $\begin{array}{c ccccccccccccccccccccccccccccccccccc$ | 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 |



Phone: 620-682-7933 http://kcc.ks.gov/

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

October 21, 2021

Nick Gerstner Palomino Petroleum, Inc. 4924 SE 84TH ST NEWTON, KS 67114-8827

Re: Temporary Abandonment API 15-171-20959-00-00 ROCKING R FARMS 2 NE/4 Sec.16-20S-34W Scott County, Kansas

Dear Nick Gerstner:

"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 10/21/2022.

\* 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 10/21/2022.

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

Very truly yours,

Michael Maier"