KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

Name:Address 1:Address 2:Stat City:Stat Contact Person:Stat Phone: () Contact Person Email: Field Contact Person: Field Contact Person Phone: () Conduct SizeStat Setting Depth	te: Zip:	+		GPS Location	on: Lat:	c g. xx. xxxxx) D83	Twp feet from , Long: . GS84 on: OG WS ENHF	□ N / □ E / - Well #: SW □ O R Permit	S W (e.gxx) :	Line of S Line of S (.xxxx)	ection
Address 2: Stat City: Stat Contact Person: Phone: () Contact Person Email: Field Contact Person Phone: () Field Contact Person Phone: () Size Setting Depth	te: Zip:	+		GPS Location Datum: County: Lease Name Well Type: (i SWD Pet Gas Sto Spud Date: .	on: Lat: NAD27	g. xx.xxxxx) D83	feet from feet from , Long: . GS84 on: OG WS ENHF 	□ N / □ E / - Well #: SW □ O R Permit	S W (e.gxx) :	Line of So Line of So (.xxxx)	ection ection
City: Stat Contact Person: Phone:() Contact Person Email: Field Contact Person Phone: () Field Contact Person Phone: () Conduct Size Setting Depth				GPS Location Datum: Lease Name Well Type: (i SWD Per Gas Sto Spud Date:	on: Lat: NAD27	<i>g. xx.xxxxx</i>) D83	feet from , Long: . GS84 on: OG WS ENHF . Date Shut-I	☐ E / Well #: SW ☐ O R Permit	(e.gxx) (e.gxx)	Line of So (Ection
Contact Person: Phone:() Contact Person Email: Field Contact Person: Field Contact Person Phone: () Conduct Size Setting Depth				Datum: County: Lease Name Well Type: (SWD Pe Gas Sto Spud Date:	on: Lat: NAD27	g. xx.xxxxx) D83	, Long: , GS84 on:] OG [] WS ENHF Date Shut-I	_ Well #:	(e.gxxx (e.gxxx) (e.g	(.xxxx)	KB
Contact Person: Phone:() Contact Person Email: Field Contact Person: Field Contact Person Phone: () Conduct Size Setting Depth				Datum: County: Lease Name Well Type: (SWD Pe Gas Sto Spud Date:	(e., NAD27 NAI e: check one) C ermit #: rage Permit #:	9	GS84 on: OG WS ENHF _ Date Shut-I	_ Well #: SW)ther:	GL [
Contact Person Email: Field Contact Person: Field Contact Person Phone: () Conduct Size Setting Depth				County: Lease Name Well Type: (i SWD Pe Gas Sto Spud Date: .	e: check one) [] C ermit #: rage Permit #:	Elevati	on: OG WS ENHF Date Shut-I	_ Well #: SW	other:		
Contact Person Email: Field Contact Person: Field Contact Person Phone: () Conduct Size Setting Depth				Lease Name Well Type: (i SWD Pe Gas Sto Spud Date:	e:Check one) C ermit #: rage Permit #:	Dil _ Gas _	☐ OG	_ Well #: SW	other:		
Field Contact Person:				Gas Sto Spud Date:	ermit #: rage Permit #:		_ Date Shut-I	R Permit	#:		
Field Contact Person Phone: () Conduc Size Setting Depth				Gas Sto Spud Date:	rage Permit #:		Date Shut-I				
Conduct Size Setting Depth			Pro	Spud Date:	-		Date Shut-I	In:		Tubing	
Size Setting Depth	ctor S	Surface	Pro					In:		Tubing	
Size Setting Depth	ctor S	Surface	Pro	duction	Intermedia	te	Liner			Tubing	
Setting Depth										0	ľ
Amount of Comont											
Amount of Cement											
Top of Cement											
Bottom of Cement											
Casing Fluid Level from Surface:		How Det	orminod?					Dat	۵.		
0											
Casing Squeeze(s): to to	tom)	38003 01 001	iieiii,	(top) 10	(bottom)	·	Sacks of Cerri	ient. Dat			
Do you have a valid Oil & Gas Lease? [Yes No										
Depth and Type: Unk in Hole at	Tools in	Hole at	Cas	sing Leaks:	Yes No I	Depth of ca	sing leak(s):				
Type Completion: ALT. I ALT. II							(depth)	,			
Packer Type:	Size:		Inch 3	Set at:		_ Feet					
Total Depth:	_ Plug Back Depth: _		F	Plug Back Metho	od:						
Geological Date:											
Formation Name	Formation Top Form	nation Base			Comp	letion Inform	mation				
1 A	.t: to	Feet	Perfor	ation Interval _	to	Feet or	Open Hole I	nterval_		to	_ Feet
2 A	to	Feet	Perfor	ation Interval -	to	Feet or	Open Hole I	nterval _		to	_Feet

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: 🗌 Yes 🗌 D	Denied Date:				

Mail to the Appropriate KCC Conservation Office:

$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	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: 620-902-6450 http://kcc.ks.gov/

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

December 02, 2021

Tracy Miller Cherokee Wells LLC P.O. BOX 296 FREDONIA, KS 66736-0296

Re: Temporary Abandonment API 15-205-26661-00-00 ARNOLD A-2 SW/4 Sec.31-28S-14E Wilson County, Kansas

Dear Tracy Miller:

"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 12/02/2022.

* 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 12/02/2022.

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

Very truly yours,

John Almond"