

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form must be Typed

Form must be signed

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License# 35117

Name: Poverty Knob Production, LLC

Address 1: 39395 W 351ST ST.

Address 2: _____

City: OSAWATOMIE State: KS Zip: 66064 + 4214

Contact Person: m kitchen

Phone: (913) 731-8367

Contact Person Email: _____

Field Contact Person: _____

Field Contact Person Phone: (_____) _____

API No. 15- 15-121-31649-00-00

Spot Description: SE NE NW NW Sec. 7 Twp. 18 S. R. 22 ☒ E ☐ W
4766 feet from ☐ N / ☒ S Line of Section
4216 feet from ☒ E / ☐ W Line of Section

GPS Location: Lat: _____, Long: _____
 (e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: Miami Elevation: _____ ☐ GL ☐ KB

Lease Name: KITCHEN Well #: 15

Well Type: (check one) ☒ Oil ☐ Gas ☐ OG ☐ WSW ☐ Other: _____

☐ SWD Permit #: _____ ☐ ENHR Permit #: _____

☐ Gas Storage Permit #: _____

Spud Date: 10/22/2021 Date Shut-In: 10/26/2021

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	n/a	7	2.875	n/a	n/a	n/a
Setting Depth		22	620			
Amount of Cement		5	63			
Top of Cement		0	0			
Bottom of Cement		22	630			

Casing Fluid Level from Surface: 0 How Determined? sight Date: 02/01/2022

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: 630 Plug Back Depth: 620 Plug Back Method: cement

Geological Date:

Formation Name Formation Top Formation Base Completion Information

1. _____ At: _____ to _____ Feet Perforation Interval 0 to 0 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: Keith Carswell ECRS Comments: _____

TA Approved: ☒ Yes ☐ Denied Date: 02/21/2022

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

February 21, 2022

m kitchen
Poverty Knob Production, LLC
39395 W 351ST ST.
OSAWATOMIE, KS 66064-4214

Re: Temporary Abandonment
API 15-121-31649-00-00
KITCHEN 15
NW/4 Sec.07-18S-22E
Miami County, Kansas

Dear m kitchen:

"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 02/21/2023.

- * 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 02/21/2023.

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

Very truly yours,

Keith Carswell ECRS"