

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License# _____
Name: _____
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____ + _____
Contact Person: _____
Phone:(_____) _____
Contact Person Email: _____
Field Contact Person: _____
Field Contact Person Phone: (_____) _____

API No. 15- _____
Spot Description: _____
Sec. _____ Twp. _____ S. R. _____ E _____ W _____
feet from _____ N / _____ S Line of Section
feet from _____ E / _____ W Line of Section
GPS Location: Lat: _____, Long: _____
Datum: _____ NAD27 _____ NAD83 _____ WGS84
County: _____ Elevation: _____ GL _____ KB
Lease Name: _____ Well #: _____
Well Type: (check one) _____ Oil _____ Gas _____ OG _____ WSW _____ Other: _____
_____ SWD Permit #: _____ ENHR Permit #: _____
_____ Gas Storage Permit #: _____
Spud Date: _____ Date Shut-In: _____

Table with 7 columns: Conductor, Surface, Production, Intermediate, Liner, Tubing. Rows include Size, Setting Depth, Amount of Cement, Top of Cement, Bottom of Cement.

Casing Fluid Level from Surface: _____ How Determined? _____ Date: _____
Casing Squeeze(s): _____ to _____ w / _____ sacks of cement, _____ to _____ w / _____ sacks of cement. Date: _____
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): _____
Type Completion: _____ ALT. I _____ ALT. II Depth of: _____ DV Tool: _____ w / _____ sacks of cement _____ Port Collar: _____ w / _____ sack of cement
Packer Type: _____ Size: _____ Inch Set at: _____ Feet
Total Depth: _____ Plug Back Depth: _____ Plug Back Method: _____

Geological Date:

Table with 4 columns: Formation Name, Formation Top, Formation Base, Completion Information. Rows 1 and 2 for geological data.

UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

Submitted Electronically

Form with fields: 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/No), Date.

Mail to the Appropriate KCC Conservation Office:

Table with 3 columns: District Office #, Address, Phone. Includes map of Kansas with numbered districts 1-4.

Jeremy Ulrich
 53 Jay Street
 Russell, KS 67665

201071

Customer's Order No. _____ DATE 2-27-22

SOLD TO Popp Operating

ADDRESS Boomer A #2 & #3

SALESMAN _____ TERMS _____

CASH	CHARGE	C. O. D.	PAID OUT	RETD. MDSE.	RECD. ON ACCT.
QUAN.	DESCRIPTION			PRICE	AMOUNT
	Boomer A #2 flwd level 832' down to flwd				75 00
	19.80 fts down to flwd Slight slow on the casing Open hole				
	Boomer A #3 flwd level 589.33' down to flwd				75 00
	14.03 fts down to flwd Slight slow on the casing Open hole				
Thank You!					
				Total	150 00

ALL Claims and Returned Goods MUST Be Accompanied By This Bill

SIGNATURE _____

Conservation Division
District Office No. 4
2301 E. 13th Street
Hays, KS 67601-2651



Phone: 785-261-6250
Fax: 785-625-0564
<http://kcc.ks.gov/>

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

Laura Kelly, Governor

February 28, 2022

RICKEY POPP
Popp Operating, Inc.
191 NE 150 RD
PO BOX 187
HOISINGTON, KS 67544-0187

Re: Temporary Abandonment
API 15-167-23344-00-00
BOOMHOWER A 2
NW/4 Sec.32-15S-13W
Russell County, Kansas

Dear RICKEY POPP:

"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 02/28/2023.

- * 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 02/28/2023.

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

Very truly yours,

RICHARD WILLIAMS"