

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: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)
 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: _____

	Conductor	Surface	Production	Intermediate	Liner	Tubing
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: _____
(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: _____ Plug Back Depth: _____ Plug Back Method: _____

Geological Data:

Formation Name	Formation Top	Formation Base	Completion Information
1. _____	At: _____	to _____ Feet	Perforation Interval _____ to _____ 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: _____ Comments: _____				
TA Approved: <input type="checkbox"/> Yes <input type="checkbox"/> Denied Date: _____					

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



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 34466
LOCATION Oakley Ks
FOREMAN Walt Dinkel

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
4-21-12		McKinley #1	24	55	22 ^w	Norton	
CUSTOMER Castle Resources		Hill City		TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS		14N		469	Josh Gumblo		
CITY		4 3/4 E		439	Bobby Stronert		
STATE		3N		528-T127	Wes Flynn		
ZIP CODE							

JOB TYPE Prod-DV HOLE SIZE 7 7/8 HOLE DEPTH 3800' CASING SIZE & WEIGHT 5 1/2 - 14#
 CASING DEPTH 3792' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.2 12 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 25.37
 DISPLACEMENT 92 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting, Rig up on Tornado Drk, circ casing on bottom 1 Hr
Pumped 500 gal Mud Flush, mixed 150 sks OWC, 5# Kalseal, clear Pump + Lines
release Plug, Displace 46 BBL H₂O + 46 BBL mud @ 700 #, Landed Plug @ 1200 #
released Pressure, Float Held, open DV Tool, circ 45 min,
mixed 30 sks in P.H, mixed 380 sks 6 3/4 poz, 8% Gel, 1/4 # Flo Seal, clear Pump
+ Lines, release Plug + Displace 48 BBL H₂O @ 650 #, Landed Plug @ 1700 #
release Pressure, Tool Held
Cement Dred Circ

Thank You
Walt + crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401P	1	PUMP CHARGE	2,700 ⁰⁰	2,700 ⁰⁰
5406	40	MILEAGE	5 ⁰⁰	200 ⁰⁰
1126	150 sks	OWC	22 ⁵⁵	3,382 ⁵⁰
1110A	750 #	Kalseal	1 ⁵⁶	420 ⁰⁰
1144G	500 gal	Mud Flush	1 ⁰⁰	500 ⁰⁰
1131	380 sks	6 3/4 poz	15 ¹⁰	5,738 ⁰⁰
1118B	2616 #	Bentonite Gel	1 ²⁵	654 ⁰⁰
11030	95 #	Flo Seal	2 ⁸²	270 ⁷⁵
5407A	23.39	Ton Mileage Delivery	1 ⁶⁷	1,562 ⁴⁰
4159	1	5 1/2 AFU Float Shoe	413 ⁰⁰	413 ⁰⁰
4130	6	5 1/2 Centralizers	58 ⁰⁰	348 ⁰⁰
4104	3	5 1/2 Baskets	276 ⁰⁰	828 ⁰⁰
4283	1	5 1/2 DV Tool w/ Latchdown	3850 ⁰⁰	3,850 ⁰⁰
				20,866 ⁵⁰
		Less 10% Disc	-	2,086 ⁵⁰
				18,779 ⁹⁰
			SALES TAX	
			ESTIMATED TOTAL	

Ravin 3737
AUTHORIZATION Jeff Crawford

TITLE _____ DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.

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

March 18, 2022

Jeff Crawford
Crawford, Jeff dba Jeff's Oilwell Supervision
705 BAUM ST
PO BOX 245
NATOMA, KS 67651-0245

Re: Temporary Abandonment
API 15-137-20604-00-00
MCKINLEY 1
SW/4 Sec.24-05S-22W
Norton County, Kansas

Dear Jeff Crawford:

Your application for Temporary Abandonment (TA) for the above-listed well is denied for the following reasons(s):

Lack of Lease

Pursuant to K.A.R. 82-3-111, the well must be plugged, or returned to service, or obtain temporary abandonment status by 04/17/2022.

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,
RICHARD WILLIAMS
KCC DISTRICT 4