

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 Data:

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

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: _____ Yes _____ Denied Date: _____

Mail to the Appropriate KCC Conservation Office:

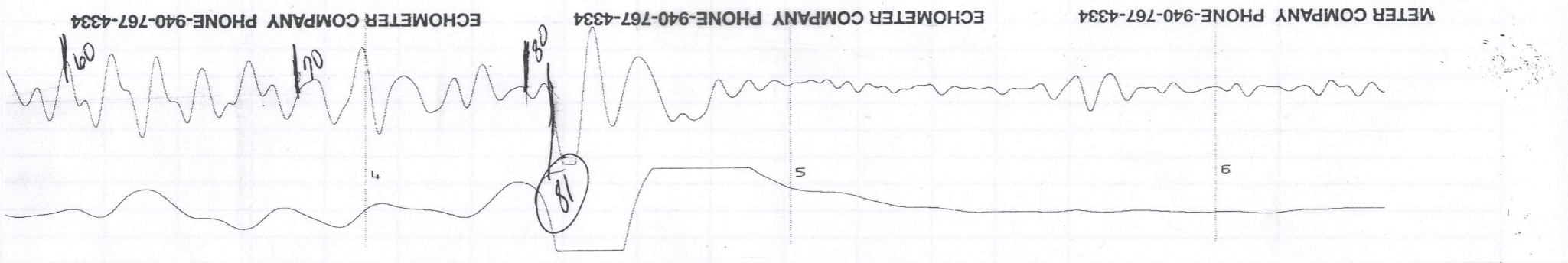
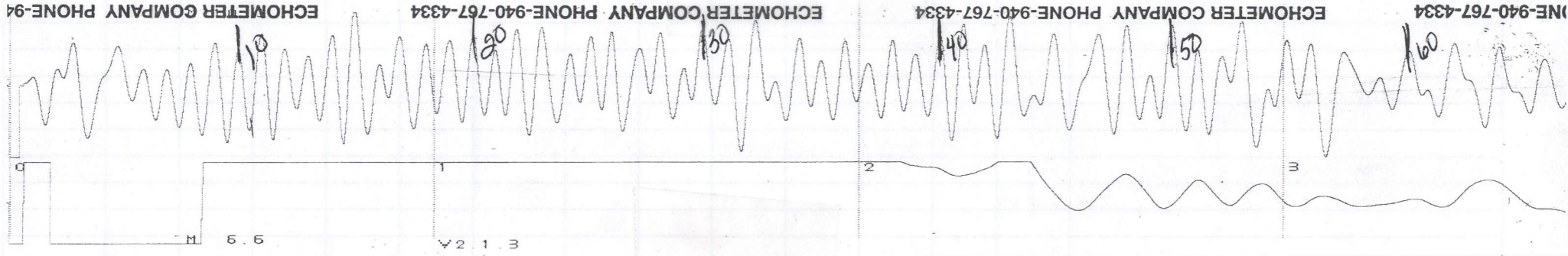
Table with 3 columns: District Office #, Address, Phone. Rows 1-4.

PRECISION WIRELINE and TESTING
P.O. BOX 560
LIBERAL, KANSAS 67905-0560
620-629-0204

PRODUCER PLATEAU OPERATING
WELL NAME MONARCH BOUNDS 2-10
LOCATION NE NW 10-18S-40W
COUNTY GREELEY STATE KS

CSG _____ WT _____ SET @ _____ TD _____ PB _____ GL _____
TBG _____ WT _____ SET @ _____ SN _____ PKR _____ KB _____
PERFS _____ TO _____ TO _____ TO _____ TO _____
PROVER _____ METER _____ TAPS _____ ORIFICE _____ PCR _____ TCR _____
GG _____ API _____ @ _____ GM _____ RESERVOIR _____

| DATE TIME OF READING | ELAP TIME HOUR | WELLHEAD PRESSURE DATA | | | | | | MEASUREMENT DATA | | | | LIQUIDS | | TYPE INITIAL _____ SPEICAL _____ ENDING _____ TEST: ANNUAL _____ RETEST _____ DATE <u>4-25-22</u> | | | | |
|----------------------|----------------|------------------------|----------------|----------|----------------|----------|----------------|------------------|-------|------|--------|------------|-------------|--|--|--|--|--|
| | | CSG PSIG | ΔP CSG | TBG PSIG | ΔP TBG | BHP PSIG | ΔP BHP | PRESS PSIG | DIFF. | TEMP | Q MCFD | COND BBLs. | WATER BBLs. | REMARKS PERTINENT TO TEST DATA QUALITY | | | | |
| MONDAY | | | | | | | | | | | | | | | | | | |
| 4-25-22 | | | | | | | | | | | | | | | | | | ASSUME AVERAGE JT. LENGTH = 31.50' |
| 1145 | | 4.3 | | | | | | | | | | | | | | | | CONDUCT LIQUID LEVEL DETERMINATION TEST |
| | | | | | | | | | | | | | | | | | | SHOT JTS TO DISTANCE |
| | | | | | | | | | | | | | | | | | | # FLUID TO FLUID |
| | | | | | | | | | | | | | | | | | | 1 81.0 2552' |
| | | | | | | | | | | | | | | | | | | 2 81.0 2552' |



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Conservation Division
District Office No. 1
210 E. Frontview, Suite A
Dodge City, KS 67801



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

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

Laura Kelly, Governor

April 28, 2022

Bill Kerrigan
Plateau Operating Corporation
PO BOX 50974
NASHVILLE, TN 37205-0974

Re: Temporary Abandonment
API 15-071-20841-00-00
BOUNDS 2-10
NW/4 Sec.10-18S-40W
Greeley County, Kansas

Dear Bill Kerrigan:

"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 04/28/2023.

- * 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 04/28/2023.

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

Very truly yours,

Michael Maier"