## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form must be signed

All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

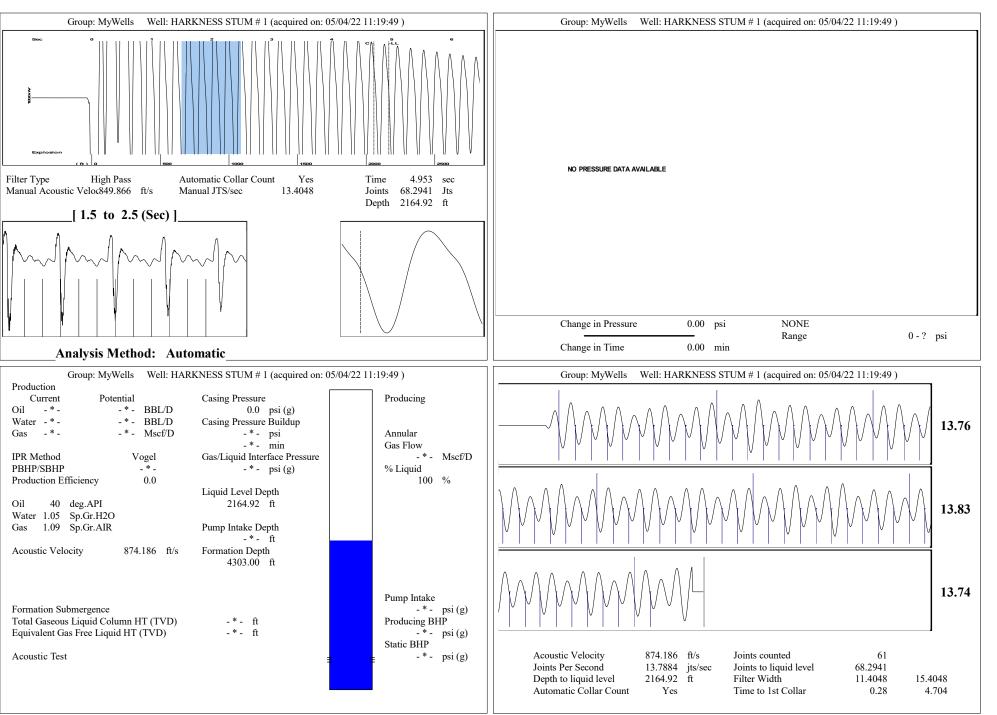
| OPERATOR: License#                          |                  |               |                        | API No. 15-          | API No. 15                      |                                |        |           |  |  |
|---|------------------|---------------|------------------------|----------------------|---------------------------------|--------------------------------|--------|-----------|--|--|
|   |                  |               |                        | Spot Descr           |                                 |                                |        |           |  |  |
| Address 1:                                  |                  |               |                        |                      | Sec Twp S. R E [] W             |                                |        |           |  |  |
|   |                  |               |                        |                      | feet from N / S Line of Section |                                |        |           |  |  |
| City:                                       | State:           | Zip:          | +                      |                      |                                 |                                |        |           |  |  |
| Contact Person:                             |                  |               |                        | GF 5 LUCal           |                                 |                                |        |           |  |  |
| Phone:()                                    |                  |               |                        |                      | County: Elevation: GL KB        |                                |        |           |  |  |
|   |                  |               |                        | Lagas Nor            | Lease Name:                     |                                |        |           |  |  |
| Field Contact Person:                       |                  |               |                        |                      | (check one) 🗌 (                 | Dil 🗌 Gas 🗌 OG 🗌 WSW 🗌 Ot      | her:   |           |  |  |
| Field Contact Person Phor                   |                  |               |                        |                      | SWD Permit #:  ENHR Permit #:   |                                |        |           |  |  |
|   | ie.()            |               |                        |                      |                                 |                                |        |           |  |  |
|   |                  |               |                        | Spud Date:           |                                 | Date Shut-In:                  |        |           |  |  |
|   | Conductor        | Surfac        | e                      | Production           | Intermedia                      | ate Liner                      | Tubing | g         |  |  |
| Size  |                  |               |                        |                      |                                 |                                |        |           |  |  |
| Setting Depth                               |                  |               |                        |                      |                                 |                                |        |           |  |  |
| Amount of Cement                            |                  |               |                        |                      |                                 |                                |        |           |  |  |
| Top of Cement                               |                  |               |                        |                      |                                 |                                |        |           |  |  |
| Bottom of Cement                            |                  |               |                        |                      |                                 |                                |        |           |  |  |
| Cooing Elvid Lovel from C                   |                  |               | Llow Determ            | in a dQ              |                                 | Date                           |        |           |  |  |
| •   |                  |               |                        |                      |                                 |                                |        |           |  |  |
| (top) (top) (top) (top)                     | (bottom)         | v/s           | acks of certien        | ( <i>top</i> )       | (bottom)                        | sacks of cement. Date          |        |           |  |  |
| Do you have a valid Oil & (                 | Gas Lease? 🗌 Yes | No            |                        |                      |                                 |                                |        |           |  |  |
| Depth and Type: Junk                        | in Hole at       | Tools in Hole | e at                   | Casing Leaks:        | Yes No                          | Depth of casing leak(s):       |        |           |  |  |
|   |                  |               |                        |                      |                                 |                                |        | of comon  |  |  |
|   |                  |               |                        |                      |                                 | Port Collar: w /               | Sauk ( | or cement |  |  |
| Packer Type:                                | Size:            |               |                        | Inch Set at:         |                                 | _ Feet                         |        |           |  |  |
| Total Depth:                                | Plug Back Depth: |               |                        | Plug Back Meth       | _ Plug Back Method:             |                                |        |           |  |  |
| Geological Date:                            |                  |               |                        |                      |                                 |                                |        |           |  |  |
| Formation Name Formation Top Formation Base |                  |               | Completion Information |                      |                                 |                                |        |           |  |  |
| 1   | At:              | to            | Feet                   | Perforation Interval | to                              | Feet or Open Hole Interval     | to     | Feet      |  |  |
|   | ۸.               | to            | Foot                   |                      | 4                               |                                | to     | Foot      |  |  |
| 2   | At:              | 10            | Feel                   | Perioration Interval | to                              | — Feet or Open Hole Interval — | i0     | Feel      |  |  |

## Submitted Electronically

| Do NOT Write in This<br>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:

|   | 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 |
| Non  Non <td>KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720</td> <td>Phone 620.902.6450</td>  | KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720                            | Phone 620.902.6450 |
| None  None <th< td=""><td>KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651</td><td>Phone 785.261.6250</td></th<> | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651                      | Phone 785.261.6250 |





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

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

May 10, 2022

Octavio Morales American Warrior, Inc. PO BOX 399 GARDEN CITY, KS 67846-0399

Re: Temporary Abandonment API 15-135-24403-00-00 HARKNESS-STUM 1 SE/4 Sec.12-19S-24W Ness County, Kansas

Dear Octavio Morales:

"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 05/10/2023.

\* 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 05/10/2023.

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

Very truly yours,

Michael Maier"