Form must be Typed

## TEMPORARY ABANDON

OPERATOR: License# \_\_\_\_\_

Contact Person Email: \_\_\_\_\_

Field Contact Person Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Casing Fluid Level from Surface:\_\_\_\_\_

Do you have a valid Oil & Gas Lease? Yes No

Conductor

Casing Squeeze(s): \_\_\_\_\_ to \_\_\_\_ w / \_\_\_\_ sacks of cement,

Depth and Type: 

Junk in Hole at \_\_\_\_\_ Tools in Hole at \_\_\_\_\_ (depth) Type Completion: ALT. I ALT. II Depth of: DV Tool: (depth)

\_\_\_ Size: \_\_\_

\_\_ Plug Back Depth: \_\_

Formation Top Formation Base \_\_\_\_ At: \_\_\_\_ to \_\_\_\_ Feet

Surface

Name: \_ Address 1: Address 2: \_\_\_

Size

Setting Depth Amount of Cement Top of Cement **Bottom of Cement** 

Packer Type: \_\_\_

Total Depth: \_\_\_

Geological Date: Formation Name

Contact Person: \_\_\_\_ Phone:( \_\_\_\_\_ ) \_\_

Field Contact Person: \_\_\_

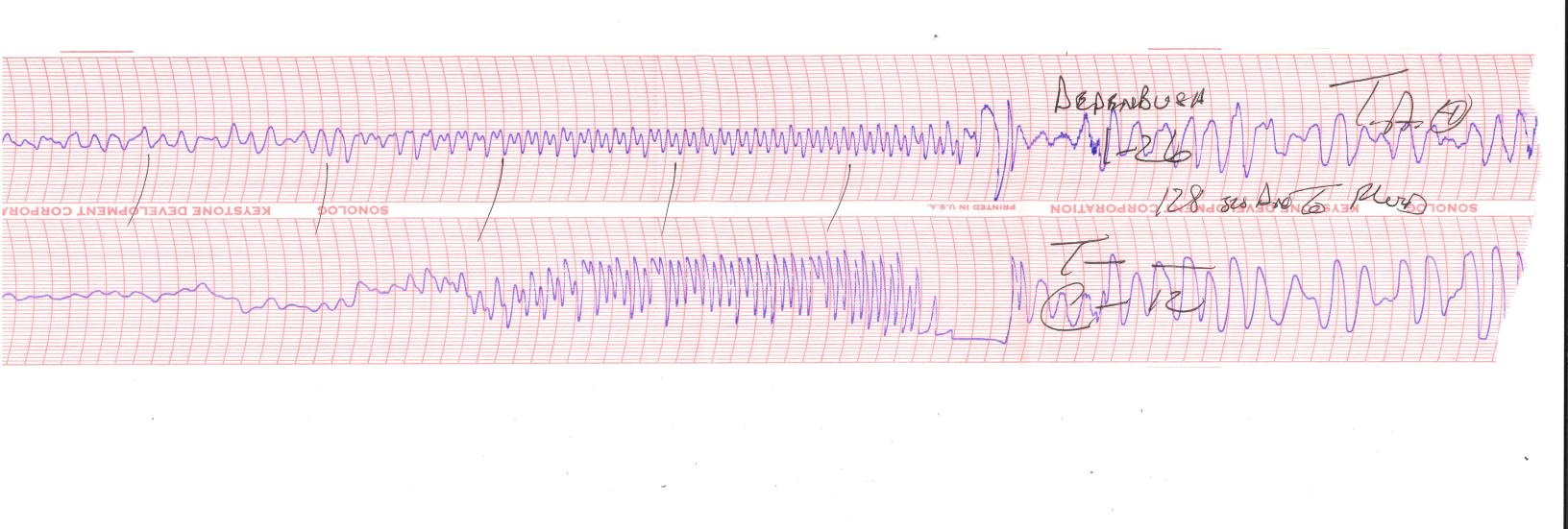
ADANL	DONMENT WE	LL APPLICA	I ION A	l blanks must be complet				
	API No. 15-							
	Spot Descri	Spot Description:						
+	GPS Location	Sec	feet from N / feet from E / Long:	S Line of Section W Line of Section				
	County:	Datum:         NAD27         NAD83         WGS84           County:         Elevation:         GL         KB						
	Well Type: (d	e: check one)	s OG WSW 0	Other:				
		Gas Storage Permit #:  Spud Date: Date Shut-In:						
ice	Production	Intermediate	Liner	Tubing				
	ermined?							
sacks of cer	ment, to	(bottom) W /	sacks of cement. Da	ate:				
e at	Casing Leaks:	Yes No Depth of	casing leak(s):					
	w / sacks							
	Inch Set at:		(30)					
	Plug Back Metho	od:						
on Base		Completion In	formation					
Feet	Perforation Interval _	toFeet	or Open Hole Interval	toFee				
Feet	Perforation Interval _	to Feet	or Open Hole Interval	toFee				
	ed Electronically	EIN ISTRILE AND COD						

## Submitted El

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 C	Denied Date:				

## Mail to the Appropriate KCC Conservation Office:





SONOFO

Conservation Division District Office No. 2 3450 N. Rock Road Building 600, Suite 601 Wichita, KS 67226



Phone: 316-337-7400 Fax: 316-630-4005 http://kcc.ks.gov/

Laura Kelly, Governor

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

June 15, 2022

Saumyadeep Halder Atlas Operating LLC 1900 St. James Place Suite 800 Houston, TX 77056-1809

Re: Temporary Abandonment API 15-095-21983-00-00 DEPENBUSCH 1-26 SE/4 Sec.26-30S-09W Kingman County, Kansas

## Dear Saumyadeep Halder:

"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 06/15/2023.

- \* 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 06/15/2023.

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

Very truly yours,

Jeff Klock, District Supervisor"