## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License#           |                  |                 |                | API No. 15                |                   |                |                               |                |          |
|------------------------------|------------------|-----------------|----------------|---------------------------|-------------------|----------------|-------------------------------|----------------|----------|
|                              |                  |                 |                | Spot Description:         |                   |                |                               |                |          |
| Address 1:                   |                  |                 |                |                           | Se                | c 1            | Гwp S. R.                     |                | E 🗌 W    |
| Address 2:                   |                  |                 |                |                           |                   |                | feet from N /                 |                |          |
| City: State: Zip: +          |                  |                 |                | GPS Location: Lat:, Long: |                   |                |                               |                |          |
| Contact Person:              |                  |                 |                |                           | NAD27 NA          | g              |                               | (e.gxxx.xxxxx) |          |
| Phone:( )                    |                  |                 |                |                           |                   |                | n:                            | G              | ∟∏кв     |
| Contact Person Email:        |                  |                 |                |                           |                   |                | Well #                        |                |          |
| Field Contact Person:        |                  |                 |                | Well Type: (              | check one) 🗌 🤇    | Dil 🗌 Gas 🗌    | og 🗌 wsw 🗌 d                  | Other:         |          |
| Field Contact Person Phone   |                  |                 |                |                           |                   |                | ENHR Permit                   | #:             |          |
|                              | ()               |                 |                |                           | orage Permit #: _ |                |                               |                |          |
|                              |                  |                 |                | Spud Date:                |                   |                | Date Shut-In:                 |                |          |
|                              | Conductor        | Surface         | e P            | Production                | Intermedia        | ite            | Liner                         | Tubing         | 9        |
| Size                         |                  |                 |                |                           |                   |                |                               |                |          |
| Setting Depth                |                  |                 |                |                           |                   |                |                               |                |          |
| Amount of Cement             |                  |                 |                |                           |                   |                |                               |                |          |
| Top of Cement                |                  |                 |                |                           |                   |                |                               |                |          |
| Bottom of Cement             |                  |                 |                |                           |                   |                |                               |                |          |
| Casing Fluid Level from Sur  | ace:             |                 | How Determined | 1?                        |                   |                | Dat                           | te:            |          |
| Casing Squeeze(s):           |                  |                 |                |                           |                   |                |                               |                |          |
| Do you have a valid Oil & Ga | as Lease? 🗌 Yes  | No              |                |                           |                   |                |                               |                |          |
| Depth and Type: 🗌 Junk in    | n Hole at        | Tools in Hole   | at C           | Casing Leaks:             | Yes No            | Depth of casi  | ng leak(s):                   |                |          |
|                              |                  |                 |                |                           |                   |                |                               |                |          |
| Type Completion: ALT.        |                  |                 |                |                           |                   |                | (depth)                       | 3000 0         | Ji cemen |
| Packer Type:                 | Size: .          |                 | Inc            | h Set at:                 |                   | _ Feet         |                               |                |          |
|                              | Plug Back Depth: |                 |                | Plug Back Method:         |                   |                |                               |                |          |
| Total Depth:                 | 1 log D          |                 |                |                           |                   |                |                               |                |          |
| Total Depth:                 |                  |                 |                |                           |                   |                |                               |                |          |
| Geological Date:             |                  | n Top Formation | Base           |                           | Comp              | pletion Inform | ation                         |                |          |
|                              | Formatio         | •               |                | foration Interval _       |                   |                | ation<br>Open Hole Interval _ | to             | Feet     |

## Submitted Electronically

| <i>Do NOT Write in This<br/>Space -</i> KCC USE ONLY | Date Tested: | Results:  | Date Plugged: | Date Repaired: | Date Put Back in Service: |
|--|--------------|-----------|---------------|----------------|---------------------------|
| Review Completed by:                                 |              | Comments: |               |                |                           |
| TA Approved: 🗌 Yes 🗌 D                               | enied 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 |

Conservation Division District Office No. 3 137 E. 21st Street Chanute, KS 66720



Phone: 620-902-6450 http://kcc.ks.gov/

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

July 25, 2022

JENNIFER PETERS Daylight Petroleum, LLC PO BOX 52070 HOUSTON, TX 77027-2952

Re: Temporary Abandonment API 15-205-25168-00-00 BACON 12 NE/4 Sec.12-30S-15E Wilson County, Kansas

Dear JENNIFER PETERS:

"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 07/25/2023.

\* 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 07/25/2023.

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

Very truly yours,

Levi Burnett ECRS"