Form CP-111
July 2017
Form must be Typed
Form must be signed
All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

| DPERATOR: License# | | | | API No. 15- | | | | | | | | | | | | | | | |
|--|------------------------------------|----------------------|-----------|-------------------|------------------|------------------------------|---------------------|-----------|---------------------------------|-----------|---------|-----|-----------------------|------------------------------|---------------|-------|----|--|--|
| | | | | Spot Description: | | | | | | | | | | | | | | | |
| Address 1: | | | | | • | Twp \$ | |]E []W | | | | | | | | | | | |
| Address 2: | | | | | | feet from | . — | | | | | | | | | | | | |
| Address 2: | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | Field Contact Person Phone: () | | | | | SWD Permit #: ENHR Permit #: | | | | | |
| | | | | | | | | | | .() | | | Gas Storage Permit #: | | | | | | |
| | | | | | | | | | | | | | Spud Date: | | Date Shut-In: | | | | |
| | | | | | | | | | | Conductor | Surface | Pro | duction | Intermediate | Liner | Tubir | ng | | |
| Size | | | | | | | | | | | | | | | | | | | |
| Setting Depth | | | | | | | | | | | | | | | | | | | |
| Amount of Cement | | | | | | | | | | | | | | | | | | | |
| Top of Cement | | | | | | | | | | | | | | | | | | | |
| Bottom of Cement | | | | | | | | | | | | | | | | | | | |
| Casing Fluid Level from Surface: | | | | | | | | | | | | | | | | | | | |
| Do you have a valid Oil & Ga | | | | (ιορ) | (bottom) | | | | | | | | | | | | | | |
| | | _ | | | J | | | | | | | | | | | | | | |
| Depth and Type: | | | | | | | | | | | | | | | | | | | |
| Type Completion: ALT. | I ALT. II Depth o | f: DV Tool:(depth) | w/_ | sacks | s of cement Por | t Collar: \(\text{(depth)}\) | w / sack | of cement | | | | | | | | | | | |
| Packer Type: | | | | | | | | | | | | | | | | | | | |
| Total Depth: | Plug Back Depth: Plug Back Method: | | | | | | | | | | | | | | | | | | |
| Geological Date: | | | | | | | | | | | | | | | | | | | |
| Formation Name | Formation ⁻ | Top Formation Base | | | Completi | on Information | | | | | | | | | | | | | |
| l | | · | Perfo | ration Interval | · | | erval to | Feet | | | | | | | | | | | |
| 2. | At: | to Feet | | ration Interval | | Feet or Open Hole Inte | | Feet | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| INDED DENALTY OF BED | IIIBV I LIEBEDV ATTE | CT TUAT TUE INCODMAT | TON CO | NTAINED HED | EIN IS TOLIE AND | COBBECT TO THE BEG | ST OF MAY MAIOMI | EDCE | | | | | | | | | | | |
| | | Submitte | d Ele | ctronicall | у | | | | | | | | | | | | | | |
| | | | | · | | | | | | | | | | | | | | | |
| Do NOT Write in This Space - KCC USE ONLY | Date Tested: Results: | | | | Date Plugged: | Date Repaired: | Date Put Back in Se | ervice: | | | | | | | | | | | |
| Review Completed by: | | | _ Comm | nents: | | | | | | | | | | | | | | | |
| TA Approved: Yes | Denied Date: | | | | | | | _ | | | | | | | | | | | |
| | Defiled | | | | | | | | | | | | | | | | | | |
| | | Mail to the Appr | opriate l | KCC Conserv | vation Office: | | | | | | | | | | | | | | |

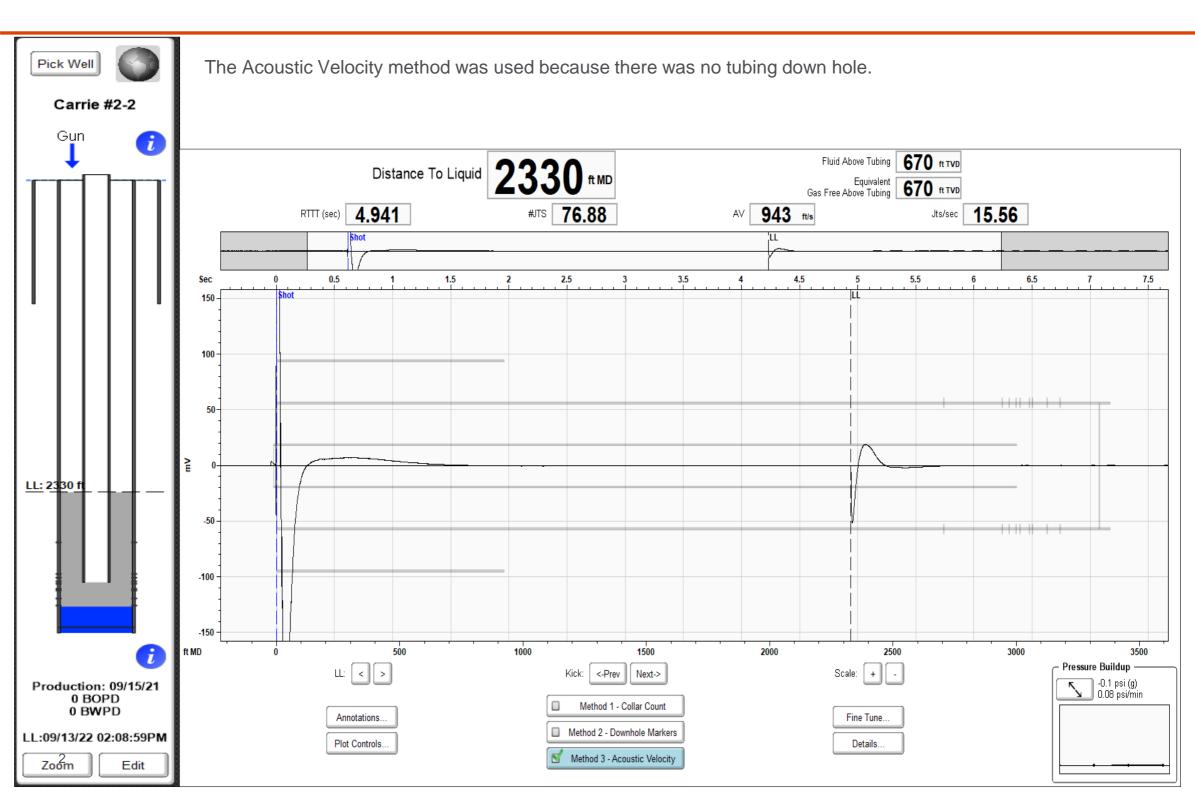
| There have been the tip and have been made have been been been been been been been be | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801 | Phone 620.682.7933 | |
|---|--|--------------------|--|
| State Same for the same same same same same same same sam | KCC District Office #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 | |
| See | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651 | Phone 785.261.6250 | |



Carrie #2-2

Fluid Shot Results

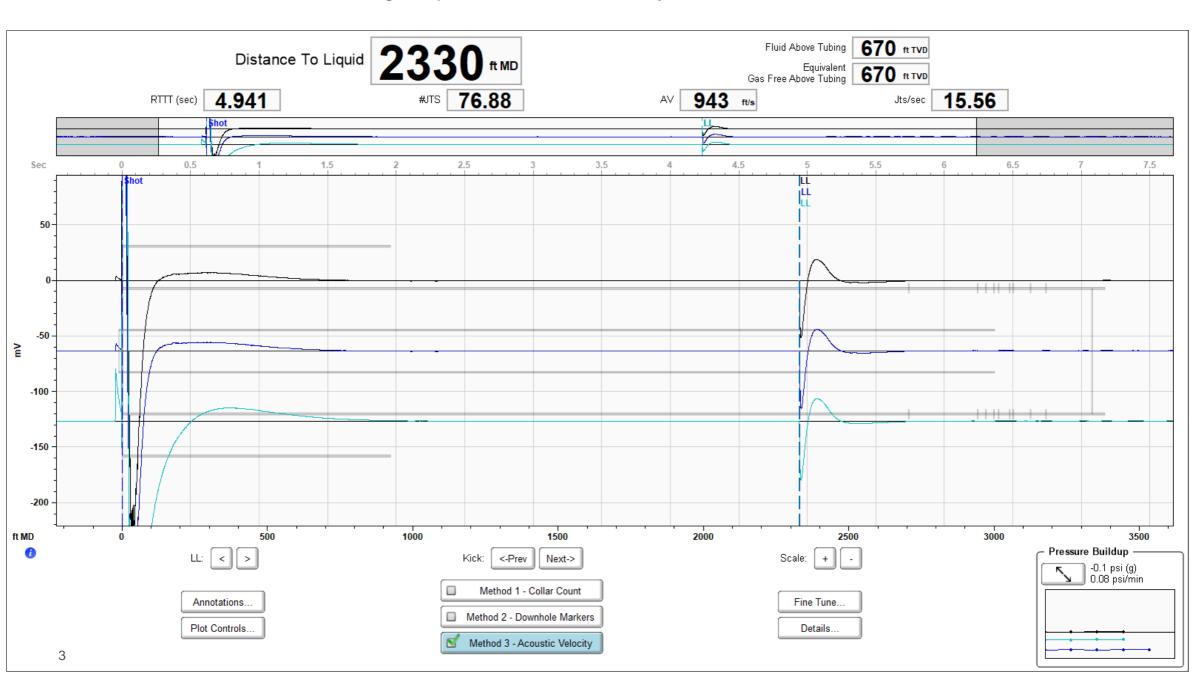




Fluid Shot Results



■ We performed a total of three fluid shots on the Carrie #2-2. Multiple shots are taken to ensure accuracy and in order to be able to find an average depth. Below is an overlay of all three shots.

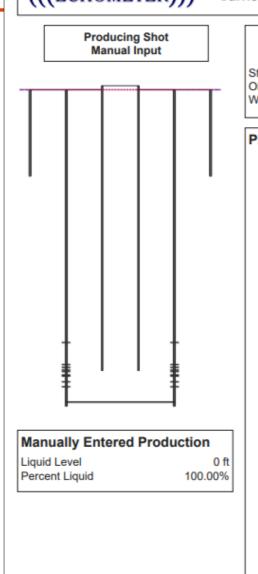


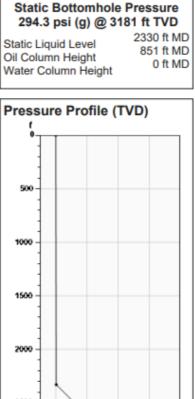
Carrie #2-2

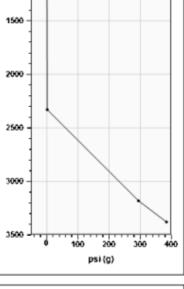
Fluid Shot Results



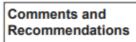


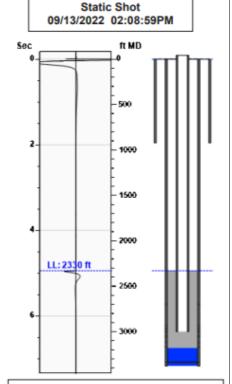


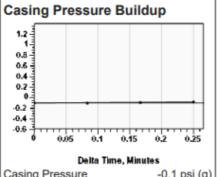












| Casing Pressure | -0.1 psi (g) |
|-----------------|----------------|
| Buildup | 0.0 psi (g) |
| Buildup Time | 15 sec |
| Gas Gravity | 1.2000 Air = 1 |



Pressure -0.1 psi (g)

Annular Gas Flow

Gas Flow 1.9 Mscf/D







Thank You



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/

Laura Kelly, Governor

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

September 14, 2022

Shannon Sheffield IA Operating, Inc. 785 W. COVELL ROAD, SUITE 200 EDMOND, OK 73003-2389

Re: Temporary Abandonment API 15-051-25251-00-00 CARRIE UNIT 2-2 NW/4 Sec.02-12S-16W Ellis County, Kansas

Dear Shannon Sheffield:

"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 09/14/2023.

- * 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 09/14/2023.

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

Very truly yours,

RICHARD WILLIAMS"