

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: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)
 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: _____

| | Conductor | Surface | Production | Intermediate | Liner | Tubing |
|------------------|-----------|---------|------------|--------------|-------|--------|
| 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: _____
(top) (bottom) (top) (bottom)
 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): _____
(depth) (depth)
 Type Completion: ALT. I ALT. II Depth of: DV Tool: _____ w / _____ sacks of cement Port Collar: _____ w / _____ sack of cement
(depth) (depth)
 Packer Type: _____ Size: _____ Inch Set at: _____ Feet
 Total Depth: _____ Plug Back Depth: _____ Plug Back Method: _____

Geological Data:

| Formation Name | Formation Top | Formation Base | Completion Information |
|----------------|---------------|----------------|--|
| 1. _____ | At: _____ | to _____ Feet | Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet |
| 2. _____ | At: _____ | to _____ Feet | Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet |

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: <input type="checkbox"/> Yes <input type="checkbox"/> 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 |
| | 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 |

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
CASING MECHANICAL INTEGRITY TEST**

Form U-7
August 2019

Disposal: Enhanced Recovery: KCC District No.: 1
 Operator License No.: 6039 Name: L. D. Drilling, Inc.
 Address 1: 7 SW 26TH AVE
 Address 2: _____
 City: GREAT BEND State: KS Zip: 67530 + 6525
 Contact Person: Susan Schneweis Phone: (620) 793-3051

API No.: 15-097-21704-00-00 Permit No.: D30971.0
 SW NW NW Sec. 34 Twp. 27 S. R. 18 East West
928 Feet from North / South Line of Section
352 Feet from East / West Line of Section
 Lease: ANTHONY Well No.: 5-34
 County: Kiowa

Well Construction Details: New well Existing well with changes to construction Existing well with no changes to construction

Maximum Authorized Injection Pressure: 0 psi Maximum Injection Rate: 5000 bbl/d

| | Conductor | Surface | Intermediate | Production | Liner | | Tubing |
|------------------|-----------|--------------|--------------|-------------|-----------|---------|-----------------|
| Size: | <u>NA</u> | <u>8.625</u> | <u>NA</u> | <u>5.5</u> | <u>NA</u> | Size: | <u>2.875</u> |
| Set at: | | <u>480</u> | | <u>5227</u> | | Set at: | <u>5178</u> |
| Sacks of Cement: | | <u>350</u> | | <u>300</u> | | Type: | <u>Sealtite</u> |
| Cement Top: | | <u>0</u> | | <u>4200</u> | | | |
| Cement Bottom: | | <u>480</u> | | <u>5227</u> | | | |

Packer Type: Stainless Steel Compression Set at: 5178

DV Tool Port Collar Depth of: _____ feet with _____ sacks of cement TD (and plug back): 5600 feet depth

Zone of Injection Formation: ARBUCKLE Top Feet: 5227 Bottom Feet: 5600 Perf. or Open Hole: Open

Is there a Chemical Sealant or a Mechanical Casing patch in the annular space? Yes No

If Dual Completion - Injection is: Above Production Below Production

FIELD DATA

GPS Location: Datum: NAD27 NAD83 WGS84 Lat: 37.65766 Long: -99.28500 Date Acquired: 06/28/2022

MIT Type: Tubing and Packer (or Initial Pressure) Test MIT Reason: 1-YEAR TEST

| | | | | | | |
|---------------------|------------|------------|------------|--|--|--|
| Time in Minute(s): | <u>0</u> | <u>15</u> | <u>30</u> | | | |
| Pressures: Set up 1 | <u>320</u> | <u>320</u> | <u>320</u> | | | |
| Set up 2 | | | | | | |
| Set up 3 | | | | | | |

Tested: Casing or Casing - Tubing Annulus System Pressure during test: 320 Bbls. to load annulus: 12

Test Date: 06/28/2022 Using: ELK Transport, LLC Company's Equipment

The zone tested for this well is between 5227 feet and 5600 feet.

The test results were verified by operator's representative:

Name: Mike Kasselmann Title: Production Supervisor Phone: (620) 793-3051

KCC Office Use Only

The results were:

- Satisfactory
 Not Satisfactory

Next MIT: 06/28/2023

State Agent: Collin Cox Title: E.C.R.S. Witness: Yes No

Remarks: 1 Year retest. Took 12 bbl to load, and was on a vacuum upon arrival

October 18, 2022

Rashell Patten
L. D. Drilling, Inc.
7 SW 26 Ave
GREAT BEND, KS 67530-6525

Re: Temporary Abandonment
API 15-097-21704-00-00
ANTHONY 5-34
NW/4 Sec.34-27S-18W
Kiowa County, Kansas

Dear Rashell Patten:

"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 10/18/2023.

- * 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 10/18/2023.

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

Very truly yours,

Michael Maier"