## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License# Name: Address 1:         |                  |             |               |                        | API No. 15-         Spot Description: |          |              |                     |      |        |       |
|---|------------------|-------------|---------------|------------------------|---------------------------------------|----------|--------------|---------------------|------|--------|-------|
|   |                  |             |               |                        |                                       |          |              |                     |      |        |       |
|   |                  |             |               |                        |                                       |          |              |                     |      |        |       |
| Address 2:                                  |                  |             |               |                        |                                       |          |              | feet fromN          |      |        |       |
| City:                                       | State:           | Zip:        | +             |                        | GPS Location: Lat:, Long:, Long:      |          |              |                     |      |        |       |
| Contact Person:                             |                  |             |               |                        | GPS Location: Lat:                    |          |              |                     |      |        |       |
|   |                  |             |               |                        |                                       |          |              |                     |      |        |       |
| Field Contact Person:                       |                  |             |               |                        | ••••                                  | ,        |              | OG WSW              |      |        |       |
| Field Contact Person Phon                   | e:()             |             |               |                        | SWD Permit #: ENHR Permit #:          |          |              |                     |      |        |       |
|   | ( )              |             |               |                        |                                       |          | #:           | Date Shut-In:       |      |        |       |
|   |                  |             |               |                        | Spud Date.                            |          |              |                     |      |        |       |
|   | Conductor        | Surfa       | ace           | Proc                   | duction                               | Intern   | nediate      | Liner               |      | Tubing |       |
| Size  |                  |             |               |                        |                                       |          |              |                     |      |        |       |
| Setting Depth                               |                  |             |               |                        |                                       |          |              |                     |      |        |       |
| Amount of Cement                            |                  |             |               |                        |                                       |          |              |                     |      |        |       |
| Top of Cement                               |                  |             |               |                        |                                       |          |              |                     |      |        |       |
| Bottom of Cement                            |                  |             |               |                        |                                       |          |              |                     |      |        |       |
| Casing Fluid Level from Su                  | rface:           |             | How Deterr    | mined? _               |                                       |          |              | D                   | ate: |        |       |
| Casing Squeeze(s):                          | to w             |             | sacks of ceme | nt,                    | to                                    | (bottom) | N /          | sacks of cement. D  | ate: |        |       |
| Do you have a valid Oil & O                 | as Lease? 🗌 Yes  | No          |               |                        |                                       |          |              |                     |      |        |       |
| Depth and Type: 🗌 Junk                      | in Hole at       | Tools in Ho | le at         | _ Cas                  | ing Leaks:                            | Yes N    | o Depth of c | asing leak(s):      |      |        |       |
| Type Completion:                            | ,                |             | ,             |                        |                                       |          |              |                     |      |        | ement |
| Packer Type:                                |                  |             |               |                        |                                       |          |              | (depui)             |      |        |       |
| Total Depth:                                | Plug Back Depth: |             |               | P                      | Plug Back Method:                     |          |              |                     |      |        |       |
| Geological Date:                            |                  |             |               |                        |                                       |          |              |                     |      |        |       |
| Formation Name Formation Top Formation Base |                  |             |               | Completion Information |                                       |          |              |                     |      |        |       |
| 1   | At:              | to          | Feet          | Perfora                | ation Interval _                      | to       | Feet o       | r Open Hole Interva | lt   | 0      | _Feet |
| 2   | At:              | to          | Feet          | Perfor                 | ation Interval -                      | to       | Feet o       | r Open Hole Interva | l t  | 0      | _Feet |
|   |                  |             |               |                        |                                       |          |              | •                   |      |        |       |

## 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 🗌 De                      | enied Date:  |           |               |                |                           |

## Mail to the Appropriate KCC Conservation Office:

| Non-         Non- <th< th=""><th>KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801</th><th>Phone 620.682.7933</th></th<> | 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 |



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

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

October 18, 2022

Joseph Forma O'Brien Energy Resources Corp. 18 CONGRESS ST, STE 207 PORTSMOUTH, NH 03801-4091

Re: Temporary Abandonment API 15-119-21422-00-00 CHARITY MAY 1A-9 SW/4 Sec.09-33S-29W Meade County, Kansas

Dear Joseph Forma:

"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"