KOLAR Document ID: 1673529

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

July 2017 Form must be Typed

## TEMPORARY ABANDONMENT WELL APPLICATION

Form must be signed All blanks must be complete

Phone 316.337.7400

Phone 620.902.6450

Phone 785.261.6250

| OPERATOR: License#   |  |                  | API No.           | 15-  |                         |                      |  |   |                              |                    |                       |                        |                         |        |
|--|--|------------------|-------------------|--|-------------------------|----------------------|--|---|------------------------------|--------------------|-----------------------|------------------------|-------------------------|--------|
| DPERATOR: License#         Name:         Address 1:         Address 2:         City:       State:       Zip:       +       —         Contact Person:       Phone:(       )         Contact Person Email:       —       —         Field Contact Person Phone:(       )       —  |  |                  |                   | Spot Description:                                      |                         |                      |  |   |                              |                    |                       |                        |                         |        |
|  |  |                  |                   |  |                         |                      |  |   |                              |                    |                       |                        | Date Shut-In: _         |        |
|  |  |                  |                   |  |                         |                      |  |   | Conductor                    | Surface            | Production            | Intermedia             | te Liner                | Tubing |
|  |  |                  |                   |  |                         |                      |  | Size  |                              |                    |                       |                        |                         |        |
|  |  |                  |                   |  |                         |                      |  | Setting Depth   |                              |                    |                       |                        |                         |        |
|  |  |                  |                   |  |                         |                      |  | Amount of Cement  |                              |                    |                       |                        |                         |        |
|  |  |                  |                   |  |                         |                      |  | Top of Cement   |                              |                    |                       |                        |                         |        |
|  |  |                  |                   |  |                         |                      |  | Bottom of Cement  |                              |                    |                       |                        |                         |        |
|  |  |                  |                   |  |                         |                      |  | Depth and Type:  Junk in Type Completion:  ALT. I Packer Type:   Total Depth:    Geological Date: | ALT. II Depth o              | f: DV Tool:(depth) | w / s<br>Inch Set at: | acks of cement         | Port Collar:w<br>_ Feet |        |
|  |  |                  |                   |  |                         |                      |  | Formation Name  | Formation Top Formation Base |                    |                       | Completion Information |                         |        |
| 1  | At:  | to Feet          | Perforation Inter | val to   | Feet or Open Hole Inter | rval toFeet          |  |   |                              |                    |                       |                        |                         |        |
| 2  | At:  | to Feet          | Perforation Inter | val to   | Feet or Open Hole Inter | rval toFeet          |  |   |                              |                    |                       |                        |                         |        |
| INDED DENALTY OF BED I   | IIDV I UEBEBV ATTE   |                  | ed Electronic     |  | IN CORRECT TO THE REC   | T OE MY I/MOM/I EDGE |  |   |                              |                    |                       |                        |                         |        |
| 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   | Denied Date:   |                  |                   |  |                         |                      |  |   |                              |                    |                       |                        |                         |        |
|  |  | Mail to the Appr | opriate KCC Cons  | servation Office:                                      |                         |                      |  |   |                              |                    |                       |                        |                         |        |
| States States States States State State State States State | 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

KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720

KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651

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



RECEIVED KCC DIST # 3

NOV 16 2022

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

CHANUTE, KS

## Casing Integrity Test

| Operator License 35657  |
|---|
| Operator Name Mylight Peroleum, LLC   |
| Address PO 130X 52010   |
| City, State, Zip Houston, TX, 71627   |
| Contact Person Colin McCully Phone (620) 754-3620   |
|   |
| Lease Bayan Well # 4 API # 15-205-20705-00-00   |
| County Wilson Section 8 Twp 305 Rge 16 EW   |
| 2041' FSL 1852' FEL   |
| GPS Lat 37. 44846 GPS Long -95. 67651 TD (Plug Back) \$28'  |
| Surface Production Tubing  Pipe NA 2  Set 828'  Cement NA  TD 829 Production formation/perf/ open hole  Fluid level 430  Tubing and Packer Fluid Depression X  Zone between D' and 809' tested.  Start RO Min. 40 Min. 60  Pressure 90 90 |
| Tested by Nicky Kegley Signature Title Superinsor   |
| Test Date   |
| KCC agent My Buntt Title E.C.R.S. Witness Y/N   |
| Witness Y/N 4 Remarks: TP: 809' FL: 630' 809-630=179'X. 43=76. 97psi.   |
| 10111a1ks. 15.001 Le 1020 004 111 11.10 116.10 100.10   |
| Computer update   |

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



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

Laura Kelly, Governor

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

November 21, 2022

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

Re: Temporary Abandonment API 15-205-20705-00-00 BRYAN 4 SE/4 Sec.08-30S-16E 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 11/21/2023.
- \* 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 11/21/2023.

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

Very truly yours,

Levi Burnett ECRS"