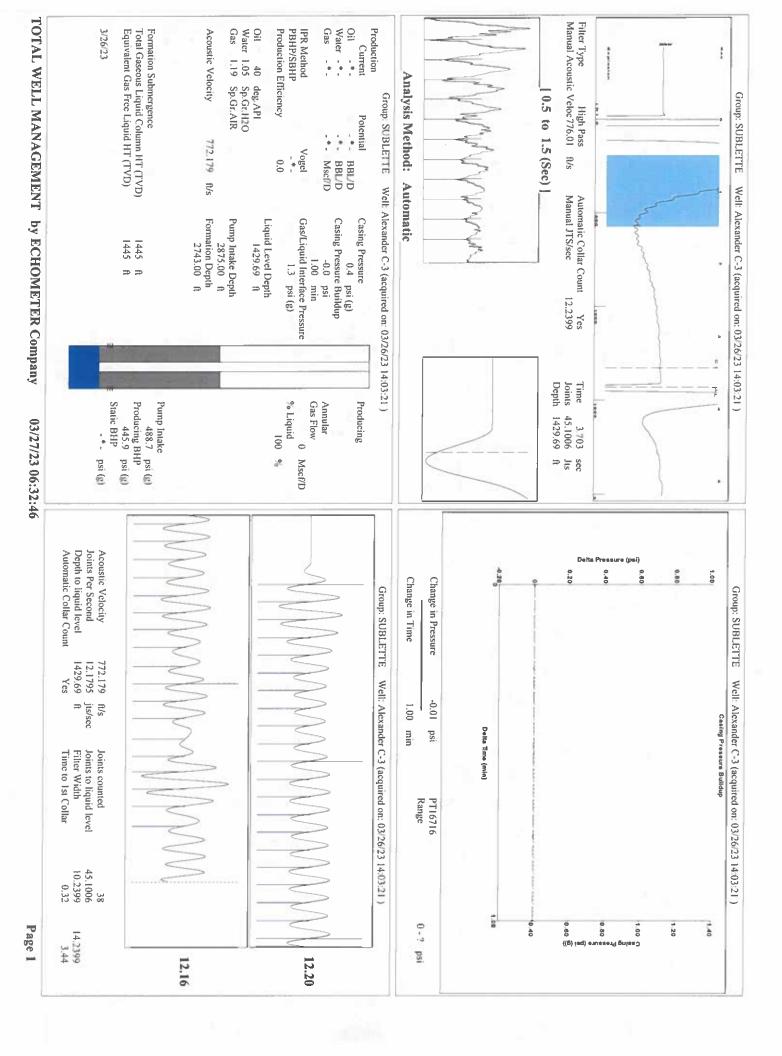
Form CP-111
July 2017
Form must be Typed
Form must be signed
All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License#                             |                   |               |          |        | API No. 15  |                      |                 |                         |            |               |          |  |
|--|-------------------|---------------|----------|--------|---|----------------------|-----------------|-------------------------|------------|---------------|----------|--|
| Name:  |                   |               |          |        | Spot Descr  | iption:              |                 |                         |            |               |          |  |
| Address 1:                                     |                   |               |          |        | Sec Twp S. R 🗆 E  |                      |                 |                         |            |               |          |  |
| Address 2:                                     |                   |               |          |        |   |                      |                 |                         |            |               |          |  |
| City:  | State:            | _ Zip:        | +        |        |   | on: Lat:             |                 |                         |            |               |          |  |
| Contact Person:                                |                   |               |          |        | Datum:  | on: Lat:             | e.g. xx.xxxxx)  | ,,                      | (          | e.gxxx.xxxxx) |          |  |
| Phone:( )                                      |                   |               |          |        | Datum:         NAD27         NAD83         WGS84           County:         Elevation:         GL         KB           Lease Name:         Well #: |                      |                 |                         |            |               |          |  |
|  |                   |               |          |        |   |                      |                 |                         |            |               |          |  |
| Field Contact Person Phone: (                  | ()                |               |          |        |   | ermit #:             |                 |                         | R Permit # | :             |          |  |
| `  | ,                 |               |          |        |   | orage Permit #:_     |                 |                         | In:        |               |          |  |
|  | Conductor         | Surfac        | ce       | Pro    | duction   | Intermedi            | ate             | Liner                   |            | Tubing        |          |  |
| Size   |                   |               |          |        |   |                      |                 |                         |            |               |          |  |
| Setting Depth                                  |                   |               |          |        |   |                      |                 |                         |            |               |          |  |
| Amount of Cement                               |                   |               |          |        |   |                      |                 |                         |            |               |          |  |
| Top of Cement                                  |                   |               |          |        |   |                      |                 |                         |            |               |          |  |
| Bottom of Cement                               |                   |               |          |        |   |                      |                 |                         |            |               |          |  |
| Do you have a valid Oil & Gas  Depth and Type: | Hole at [         | Tools in Hole | :(depth) | w/_    | sacks   | s of cement          | Port Collar:    |                         |            |               | f cement |  |
|  |                   |               |          |        |   |                      |                 |                         |            |               |          |  |
| Total Depth:                                   | Plug Ba           | ск Deptn:     |          |        | Plug Back Meth  | od:                  |                 |                         |            |               |          |  |
| Geological Date:                               |                   |               |          |        |   |                      |                 |                         |            |               |          |  |
| Formation Name                                 | Formation         | Top Formatio  | n Base   |        |   | Com                  | pletion Informa | ation                   |            |               |          |  |
| 1  | At:               | to            | Feet     | Perfo  | ration Interval   | to                   | Feet or C       | pen Hole I              | nterval    | to            | Feet     |  |
| 2  | At:               | to            | Feet     | Perfo  | ration Interval -   | to                   | Feet or C       | pen Hole I              | nterval    | to            | Feet     |  |
| UNDED DENALTY OF DED II                        |                   |               |          |        |   |                      |                 |                         |            |               |          |  |
|  |                   |               |          |        | ctronicall  |                      |                 |                         |            |               |          |  |
| Do NOT Write in This<br>Space - KCC USE ONLY   | Date Tested: Resi |               | ults:    |        | Date Plugg  | Date Plugged: Date F |                 | Repaired: Date Put Back |            | ice:          |          |  |
| Review Completed by:                           |                   |               |          | _ Comm | nents:  |                      |                 |                         |            |               |          |  |
| TA Approved: Yes                               | Denied Date:      |               |          |        |   |                      |                 |                         |            |               |          |  |
|  |                   |               |          |        |   |                      |                 |                         |            |               |          |  |

## Mail to the Appropriate KCC Conservation Office:

| Notes facts trans now make that are found parties mind make the pro-   | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801               | Phone 620.682.7933 |  |
|--|--|--------------------|--|
| These than the same has been seen that the same than the s | KCC District Office #2 - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226 | Phone 316.337.7400 |  |
| The state of the s | KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720                            | Phone 620.902.6450 |  |
| Similar State Stat | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651                      | Phone 785.261.6250 |  |



Conservation Division District Office No. 1 210 E. Frontview, Suite A Dodge City, KS 67801



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

Laura Kelly, Governor

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

March 28, 2023

Katherine McClurkan Merit Energy Company, LLC 13727 Noel Road, Suite1200 Dallas, TX 75240

Re: Temporary Abandonment API 15-081-20630-00-00 Alexander C 3 SW/4 Sec.27-27S-34W Haskell County, Kansas

## Dear Katherine McClurkan:

Your application for Temporary Abandonment (TA) for the above-listed well is denied for the following reasons(s):

## Shut-in Over 10 years

Pursuant to K.A.R. 82-3-111, the well must be plugged, or returned to service, or obtain temporary abandonment status by 04/27/2023.

This deadline does NOT override any compliance deadline given to you in any Commission Order.

You may contact me if you have any questions.

Sincerely, Michael Maier KCC DISTRICT 1