

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: _____
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: _____

Table with 7 columns: Conductor, Surface, Production, Intermediate, Liner, Tubing. Rows include 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: _____
Do you have a valid Oil & Gas Lease? Yes No
Depth and Type: Junk in Hole at _____ (depth) Tools in Hole at _____ (depth) Casing Leaks: Yes No Depth of casing leak(s): _____
Type Completion: ALT. I ALT. II Depth of: DV Tool: _____ w / _____ sacks of cement Port Collar: _____ w / _____ sack of cement
Packer Type: _____ Size: _____ Inch Set at: _____ Feet
Total Depth: _____ Plug Back Depth: _____ Plug Back Method: _____

Geological Date:

Table with 4 columns: Formation Name, Formation Top, Formation Base, Completion Information. Rows 1 and 2.

UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

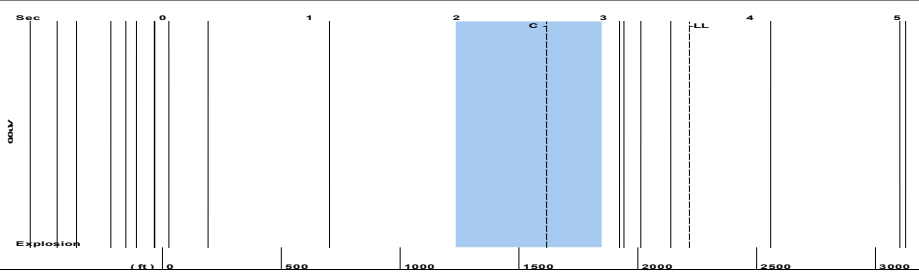
Submitted Electronically

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: Yes Denied Date: _____

Mail to the Appropriate KCC Conservation Office:

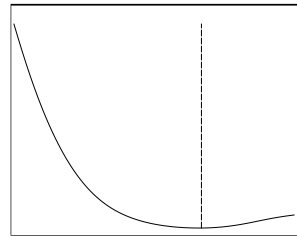
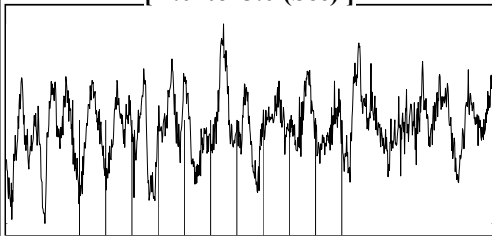
Table with 2 columns: Office Address, Phone. Rows for KCC District Office #1, #2, #3, #4.

Group: MyWells Well: BROOKOVER 1 (acquired on: 04/05/23 11:36:52)



Filter Type High Pass Automatic Collar Count Yes Time 3.588 sec
 Manual Acoustic Veloc 1176.25 ft/s Manual JTS/sec 18.5529 Joints 69.9274 Jts
 Depth 2216.70 ft

[2.0 to 3.0 (Sec)]



Analysis Method: Automatic

Group: MyWells Well: BROOKOVER 1 (acquired on: 04/05/23 11:36:52)

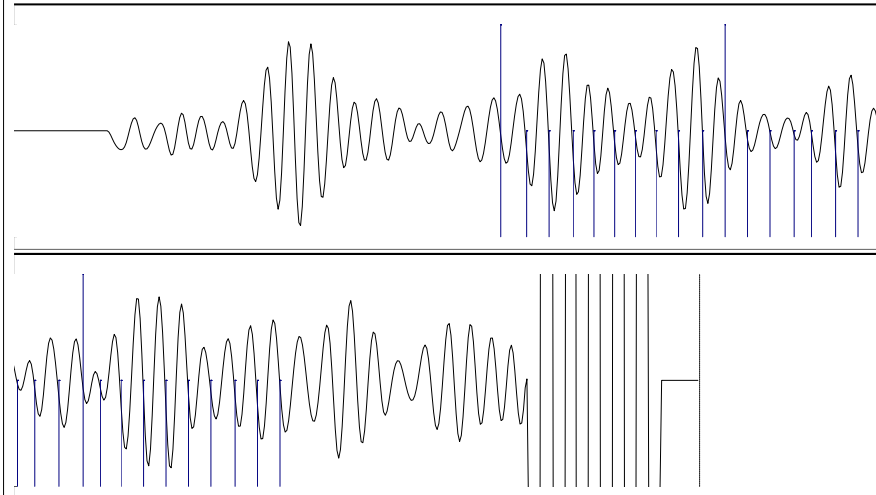
NO PRESSURE DATA AVAILABLE

Change in Pressure 0.00 psi PT12098
 Range 0 - ? psi
 Change in Time 0.00 min

Group: MyWells Well: BROOKOVER 1 (acquired on: 04/05/23 11:36:52)

<p>Production Current Potential</p> <p>Oil - * - BBL/D</p> <p>Water - * - BBL/D</p> <p>Gas - * - Mscf/D</p> <p>IPR Method Vogel</p> <p>PBHP/SBHP - * -</p> <p>Production Efficiency 0.0</p> <p>Oil 40 deg.API</p> <p>Water 1.05 Sp.Gr.H2O</p> <p>Gas 0.75 Sp.Gr.AIR</p> <p>Acoustic Velocity 1235.62 ft/s</p> <p>Formation Submergence</p> <p>Total Gaseous Liquid Column HT (TVD) - * - ft</p> <p>Equivalent Gas Free Liquid HT (TVD) - * - ft</p> <p>Acoustic Test</p>	<p>Casing Pressure 0.0 psi (g)</p> <p>Casing Pressure Buildup - * - psi</p> <p>Gas/Liquid Interface Pressure - * - min</p> <p>Liquid Level Depth 2216.70 ft</p> <p>Pump Intake Depth - * - ft</p> <p>Formation Depth 5040.00 ft</p>	<p>Producing</p> <p>Annular Gas Flow - * - Mscf/D</p> <p>% Liquid 100 %</p> <p>Pump Intake - * - psi (g)</p> <p>Producing BHP - * - psi (g)</p> <p>Static BHP - * - psi (g)</p>
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Group: MyWells Well: BROOKOVER 1 (acquired on: 04/05/23 11:36:52)



Acoustic Velocity	1235.62 ft/s	Joints counted	29
Joints Per Second	19.4892 jts/sec	Joints to liquid level	69.9274
Depth to liquid level	2216.7 ft	Filter Width	16.5529 20.5529
Automatic Collar Count	Yes	Time to 1st Collar	1.128 2.616

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



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

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

Laura Kelly, Governor

April 11, 2023

Octavio Morales
American Warrior, Inc.
PO BOX 399
GARDEN CITY, KS 67846-0399

Re: Temporary Abandonment
API 15-055-20549-00-00
BROOKOVER 1
SW/4 Sec.30-24S-32W
Finney County, Kansas

Dear Octavio Morales:

"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 04/11/2024.

- * 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 04/11/2024.

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

Very truly yours,

Michael Maier"