Kansas Corporation Commission Oil & Gas Conservation Division

Form CF-111 July 2017 Form must be Typed Form must be signed

TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

Phone 620.902.6450

Phone 785.261.6250

| OPERATOR: License# | | | | | API No. 15- | | | | | | | | |
|------------------------------------------------------------------|------------------------------|----------------------------------------------------------------------------------|-----------------------------------------------------|------------------------|----------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------------|--------------------|--------------|--------|--------|
| Name: | | | | | Spot Description: | | | | | | | | |
| Address 1: | | | | | Sec Twp S. R E W | | | | | | | | |
| | | | | | | | | | | | We | | |
| | | | | | | | | | Well Type: (| check one) 🗌 Oil 🔲 | Gas OG WSW | Other: | |
| | | | | | | | | | ☐ SWD Permit #: | | | | |
| | | | | | | | | | | | | | |
| | | | | | | Conducto | or S | Surface | Pro | oduction | Intermediate | Liner | Tubing |
| | | | | | Size | | | | | | | | |
| | | | | | Setting Depth | | | | | | | | |
| | | | | | Amount of Cement | | | | | | | | |
| Top of Cement | | | | | | | | | | | | | |
| Bottom of Cement | | | | | | | | | | | | | |
| Packer Type: Total Depth: Geological Date: Formation Name 1 2 | in Hole at(de _j I | Yes No Tools in Depth of: DV Size: Plug Back Depth: rmation Top Form to to to to | Hole at(depth) Tool:(depth) nation Base Feet Feet | Ca W / - Inch Perfo | sing Leaks: sack: Set at: Plug Back Meth ration Interval | Yes No Depth of completion to Fee to | of casing leak(s): w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w / w | al to Feet | | | | | |
| | | | Submitte | ea Ele | ctronicall | у | | | | | | | |
| Do NOT Write in This Space - KCC USE ONLY | | | | sults: | Date Plugged: Date Repaired: Date Put Back in Service: | | | | | | | | |
| Review Completed by: | | | | Comn | nents: | | | | | | | | |
| TA Approved: Yes | Denied | Date: | | | | | | | | | | | |
| | | М | ail to the Appr | opriate | KCC Conserv | vation Office: | | | | | | | |
| State State State State State State and Acad material | K | KCC District Office #1 - 210 E. Frontview, Suit | | | | ty, KS 67801 | Phone 620.682.7933 | | | | | | |
| ************************************** | K | KCC District Office #2 - 3450 N. Rock Road, | | | | Suite 601, Wichita, KS | Phone 316.337.7400 | | | | | | |

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. 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

April 19, 2023

Katherine McClurkan Merit Energy Company, LLC 13727 Noel Road, Suite 1200 Dallas, TX 75240

Re: Temporary Abandonment API 15-189-20665-00-01 Kinney Chester Sand Unit 502 SW/4 Sec.25-34S-35W Stevens County, Kansas

Dear Katherine McClurkan:

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 04/17/2024.

Your exception application expires on 04/17/2023.

- * 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 04/17/2024.

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

Very truly yours,

Michael Maier