KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License# Name: Address 1: | | | | API No. 15- | API No. 15- Spot Description: | | | | | |
|-------------------------------------|---------------------------------------|---------------|---------------|------------------------|--|----------------------------|--------|--------|--|--|
| | | | | _ Spot Descri | | | | | | |
| | | | | _ | | | | | | |
| Address 2: | | | | | feet from N / S Line of Section | | | | | |
| City: | State: | Zip: | + | | feet from E / W Line of Section | | | | | |
| Contact Person: | | | | GF 5 LUCali | GPS Location: Lat: , Long: Datum: NAD27 NAD83 WGS84 County: Elevation: | | | | | |
| | | | | | | | | | | |
| | | | | - | Lease Name: Well #: | | | | | |
| | | | | Well Type: (| Well Type: (check one) Oil Gas OG WSW Other: | | | | | |
| Field Contact Person Phone | | | | | SWD Permit #: ENHR Permit #: | | | | | |
| | | | | | | Data Chut In | | | | |
| | | | | Spud Date: | | Date Shut-In: | | | | |
| | Conductor | Surfac | e | Production | Intermedia | te Liner | Tubing | | | |
| Size | | | | | | | | | | |
| Setting Depth | | | | | | | | | | |
| Amount of Cement | | | | | | | | | | |
| Top of Cement | | | | | | | | | | |
| Bottom of Cement | | | | | | | | | | |
| Casing Fluid Level from Su | rface: | | How Determine | ed? | | Date | : | | | |
| 0 | | | | | | sacks of cement. Date | | | | |
| Do you have a valid Oil & G | as Lease? 🗌 Yes 🛛 | No | | | | | | | | |
| Depth and Type: Junk | in Hole at | Tools in Hole | at | Casing Leaks: | Yes No | Depth of casing leak(s): | | | | |
| | | | | | | Port Collar: w / | | cement | | |
| | | | | | | | | | | |
| Packer Type: | Size: _ | | In | ch Set at: | | _ Feet | | | | |
| Total Depth: | Plug Ba | ack Depth: | | Plug Back Methe | od: | | | | | |
| Geological Date: | | | | | | | | | | |
| | ion Name Formation Top Formation Base | | | Completion Information | | | | | | |
| Formation Name | | to | Feet Pe | erforation Interval | to | Feet or Open Hole Interval | to | Feet | | |
| Formation Name 1 | At: | 10 | | | | | | | | |

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 🗌 De | enied Date: | | | | |

Mail to the Appropriate KCC Conservation Office:

| $\begin{array}{ c c c c c c c c c c c c c c c c c c c$ | 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 |

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

May 04, 2023

ANGIE CATE Foundation Energy Management, LLC 5057 KELLER SPRINGS RD, SUITE 650 ADDISON, TX 75001-6583

Re: Temporary Abandonment API 15-075-20308-00-00 MONNICH 1-2 E/2 Sec.13-24S-39W Hamilton County, Kansas

Dear ANGIE CATE:

"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 05/04/2024.

* 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 05/04/2024.

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

Very truly yours,

Michael Maier"