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

| ODED ATOD. Linears# | | | | ADIN- 45 | | | | |
|--|----------------------|---|-------------|--|---|---------------------|--------------------------|--|
| OPERATOR: License# Name: | | | | API No. 15- Spot Description: | | | | |
| | | | | | • | | R DE W | |
| Address 1: | | | | | | | N / S Line of Section | |
| Address 2: | | | | | feet from E / W Line of Section | | | |
| City: + | | | | GPS Location: Lat:, Long: | | | | |
| Contact Person: | | | | | Datum: NAD27 NAD83 WGS84 County: Elevation: GL KB | | | |
| | | | | | | | | |
| | | | | | Lease Name: Well #: | | | |
| Field Contact Person Phone: () | | | | SWD Permit #: ENHR Permit #: | | | | |
| | | | | | | | | |
| | Conductor | Surface | Pro | oduction | Intermediate | Liner | Tubing | |
| Size | Conductor | Carraco | 1 | 344011011 | momodato | Lillor | Tability | |
| Setting Depth | | | | | | | | |
| Amount of Cement | | | | | | | | |
| Top of Cement | | | | | | | | |
| Bottom of Cement | | | | | | | | |
| Casing Fluid Level from Surfa | ace: | How I | Determined? | , | | | Date: | |
| • | | | | | | | | |
| Casing Squeeze(s): | (bottom) | | , _ | (top) | (bottom) | | | |
| Do you have a valid Oil & Ga | s Lease? Yes | No | | | | | | |
| Depth and Type: | Hole at [| Tools in Hole at | Ca | sing Leaks: | Yes No Depth o | f casing leak(s): | | |
| Type Completion: ALT. I | | | | | | | | |
| Packer Type: | | | | | | (depth) | | |
| | Plug Back Depth: | | | | | | | |
| Total Depth. | 1 ldg Da | ок Вории. | | r lag back wet | | | | |
| Geological Date: | | | | | | | | |
| Formation Name | | | | | Completion Information | | | |
| 1 | At: to Feet Perfo | | | oration Interval to Feet or Open Hole Interval to Feet | | | | |
| 2 | At: | to Fe | eet Perfo | ration Interval | to Feet | or Open Hole Interv | al toFeet | |
| INDED DENALTY OF DED | IIIDV I LIEDEDV ATTI | ECT TUAT TUE INFODI | MATION CO | NITAINIED LIEI | DEIN IS TOLIE AND COD | DEATTA THE DEAT | OE MV KNOW! EDGE | |
| | | Submi | ittad Ela | otronical | v | | | |
| | | Subini | illeu Ele | ctronical | у | | | |
| | | | | | | | | |
| Do NOT Write in This Date Tested: Results: | | | | | Date Plugged: | Date Repaired: Da | ite Put Back in Service: | |
| Space - KCC USE ONLY | | | | | | | | |
| Review Completed by: | | | Comr | nents: | | | | |
| TA Approved: Yes | Denied Date: | | | | | | | |
| | | Mail to the A | nnronriato | KCC Consor | vation Office: | | | |
| Mail to the Appropriate KCC Conservation Office: 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, | | | , <u> </u> | | | |
| | KCC Dist | rici Office #2 - 3450 N. | ROCK ROAD, | building 600, | Suite 601, Wichita, KS 6 | 1220 | 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. 3 137 E. 21st Street Chanute, KS 66720



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

Laura Kelly, Governor

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

June 02, 2023

Tom Cain JTC Oil, Inc. 7553 W 29TH ST LOUISBURG, KS 66053-6136

Re: Temporary Abandonment API 15-003-23287-00-00 MCGEE 22-90 SE/4 Sec.03-23S-21E Anderson County, Kansas

Dear Tom Cain:

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

Need current Fluid level

Pursuant to K.A.R. 82-3-111, the well must be plugged, or returned to service, or obtain temporary abandonment status by 07/02/2023.

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, Keith Carswell ECRS KCC DISTRICT 3