KOLAR Document ID: 1718984

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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

## TEMPORARY ABANDONMENT WELL APPLICATION

API No. 15-												
Sec   Twp.   S. R.     E   W	OPERATOR: License#					API No. 15-						
State   Stat	Name:					Spot Descr	iption:					
	Address 1:								-			
State   Zip:	Address 2:											
Datum:   NAD27   NAD28   WGS84   Country:   Elevation:   GL   KB   Contact Person Email:	City:	State:	_ Zip:	+								Section
Country: Elevation:   G.L. KB Contact Person Email:   Well #:   Lease Name:   Well #:   Well Type: (check one)   Oil   Gas   OG   WSW   Other:	Contact Person:					Datum:	NAD27 NA	g. xx.xxxxx) D83 W	, 2011g. GS84		(e.gxxx.xxxxx)	
Well Type: (check one)   Oil   Gas   OG   WSW   Other:	Phone:( )										GL	. 🗌 КВ
SWD Permit #:	Contact Person Email:					Lease Nam	e:			_ Well #:		
Gas Storage Permit #:	Field Contact Person:						, —					
Spud Date: Date Shut-in:    Conductor	Field Contact Person Phone: (	·)								R Permit #	<u> </u>	
Size Setting Depth Amount of Cement Top of Cement Bottom of Cement  Casing Fluid Level from Surface:  Casing Squeeze(s):  Ves	·	,								In:		
Setting Depth Amount of Cement Top of Cement Bottom of Ce		Conductor	Surfa	ice	Pro	duction	Intermedia	te	Liner		Tubing	
Amount of Cement  Top of Cement  Bottom of Cement  Bottom of Cement  Bottom of Cement  Casing Fluid Level from Surface: How Determined? Date: Casing Squeeze(s): Copy to Cotomy w/ Sacks of cement, Copy to Cotomy w/ Sacks of cement Date: Cotomy w/ Sacks of cement Depth of Casing leak(s): Copy to Cotomy w/ Sacks of cement Depth of Casing leak(s): Copy to Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Cotomy w/ Sacks of cement Depth of Casing leak(s): Casing le	Size											
Top of Cement  Bottom of Cemen	Setting Depth											
Bottom of Cement   Casing Fluid Level from Surface:	Amount of Cement											
Casing Fluid Level from Surface:	Top of Cement											
Casing Squeeze(s):	Bottom of Cement											
Geological Date:  Formation Name  Formation Top Formation Base  Completion Information  At:	Do you have a valid Oil & Gas  Depth and Type:   Junk in  Type Completion:  ALT. I	Lease? Yes [ Hole at  ALT. II Depth	No Tools in Hol of: DV Too	le at	Cas w / _	sing Leaks: sack	Yes No	Depth of ca	sing leak(s):			
Formation Name  Formation Top Formation Base  Completion Information  At:	Total Depth:	Plug Ba	ack Depth:			Plug Back Method:						
Formation Name  Formation Top Formation Base  Completion Information  At:	Geological Date:											
At:	-	Formation	Top Formation	on Base			Comr	oletion Infor	mation			
At: to Feet Perforation Interval to Feet or Open Hole Interval to Feet or Open Hole Interval to Feet Submitted Electronically    Do NOT Write in This   Date Tested: Results: Date Plugged: Date Repaired: Date Put Back in Service: Space - KCC USE ONLY   Comments:		At·	•		Perfo	ation Interval				Interval	to	Feet
Submitted Electronically  Do NOT Write in This space - KCC USE ONLY  Review Completed by:  Comments:	?	At:										
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TA Approved: Yes Denied Date:	Review Completed by:				_ Comm	ents:						
	TA Approved: Yes	Denied Date:	·									

## Mail to the Appropriate KCC Conservation Office:

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Name take how two too too and fact many wind over the form	KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801	Phone 620.682.7933
100 100 100 100 100 100 100 100 100 100	KCC District Office #2 - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226	Phone 316.337.7400
The contract of the contract o	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

6/15/83 P-A Koehn B-1

12"

7,582 Fr"

7

6/15/83 P-A Koehn B-1

12"

7,582 Fr"

7

Conservation Division District Office No. 2 3450 N. Rock Road Building 600, Suite 601 Wichita, KS 67226



Phone: 316-337-7400 http://kcc.ks.gov/

Laura Kelly, Governor

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

June 22, 2023

Tracy Schmidt Schmidt, Tracy 308 WESTLANE RD MCPHERSON, KS 67460-9544

Re: Temporary Abandonment API 15-113-21384-00-00 P. A. KOEHN B-1 NE/4 Sec.16-21S-03W McPherson County, Kansas

## Dear Tracy Schmidt:

- "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 06/22/2024.
- \* 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 06/22/2024.

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

Very truly yours,

Keith Karlin, ECRS"