Form CP-111

July 2017

Form must be Typed

Form must be signed

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License# | | | | API No. 15- | | | | | |
|-----------------------------------------------|-------------------------------------------|----------------------|----------|----------------------------------------------------------------|------------------------|--------------------|--------------------------|--|--|
| Name: | | | | Spot Descr | iption: | | | | |
| Address 1: | | | | | Sec | Twp S. | . R 🗌 E 🔲 W | | |
| Address 2: | | | | | | | N / S Line of Section | | |
| City: | | | | feet from ☐ E / ☐ W Line of Section GPS Location: Lat:, Long: | | | | | |
| Contact Person: | | | | | NAD27 NAD83 | | (e.gxxx.xxxxx) | | |
| Phone:() | | | | County: Elevation: GL KB | | | | | |
| Contact Person Email: | | | | | | | ell #: | | |
| Field Contact Person: | | | | Well Type: (| (check one) 🗌 Oil 🔲 G | as OG WSW | Other: | | |
| Field Contact Person Phon | e:()_ | | | Gas Sto | orage Permit #: | | rmit #: | | |
| | Conductor | Surface | Pro | oduction | Intermediate | Liner | Tubing | | |
| Size | | | | | | | | | |
| Setting Depth | | | | | | | | | |
| Amount of Cement | | | | | | | | | |
| Top of Cement | | | | | | | | | |
| Bottom of Cement | | | | | | | | | |
| Casing Fluid Level from Su Casing Squeeze(s): | to w | / sacks of ce | | | | | Date: | | |
| Depth and Type: | in Hole at [| Tools in Hole at | Ca | sing Leaks: | Yes No Depth of | of casing leak(s): | | | |
| | | | | | | | / sack of cemen | | |
| Packer Type: | | | | | | (dopar) | | | |
| Total Depth: | Plug Ba | ck Depth: | | Plug Back Meth | od: | | | | |
| Geological Date: | | | | | | | | | |
| Formation Name | rmation Name Formation Top Formation Base | | | | Completion Information | | | | |
| 1 2 | | to Feet to Feet | | | | | val toFeet val toFeet | | |
| INDED DENALTY OF BEI | D IIIDV I UEDEDV ATTE | ECT TUAT THE INCODMA | ATION CO | NTAINED HED | EIN IS TRUE AND COL | DECTTO THE DECT | FOE MV KNOW! EDGE | | |
| | | Submitt | ed Ele | ctronicall | у | | | | |
| Do NOT Write in This Space - KCC USE ONLY | Date Tested: | R | esults: | | Date Plugged: | Date Repaired: D | ate Put Back in Service: | | |
| Review Completed by: | | | Comn | nents: | | | | | |
| TA Approved: Yes | | | | | | | | | |
| | | | | | | | | | |

Mail to the Appropriate KCC Conservation Office:

| Name have been now toke tok and from homes mad man for home | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801 | Phone 620.682.7933 |
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| 1000 1000 1000 1000 1000 1000 1000 100 | KCC District Office #2 - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226 | Phone 316.337.7400 |
| The control of the co | KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720 | Phone 620.902.6450 |
| Size State S | 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/

Laura Kelly, Governor

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

July 07, 2023

Mikey Pham Scout Energy Management LLC 13800 MONTFORT DRIVE SUITE 100 DALLAS, TX 75240

Re: Temporary Abandonment API 15-055-21575-00-00 BURG 4-20 NE/4 Sec.20-22S-34W Finney County, Kansas

Dear Mikey Pham:

"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 07/07/2024.

- * 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 07/07/2024.

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

Very truly yours,

Michael Maier"