

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License# _____
Name: _____
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____ + _____
Contact Person: _____
Phone:(_____) _____
Contact Person Email: _____
Field Contact Person: _____
Field Contact Person Phone: (_____) _____

API No. 15- _____
Spot Description: _____
- - - - - Sec. _____ Twp. _____ S. R. _____ E W
_____ feet from N / S Line of Section
_____ feet from E / W Line of Section
GPS Location: Lat: _____, Long: _____
Datum: NAD27 NAD83 WGS84
County: _____ Elevation: _____ GL KB
Lease Name: _____ Well #: _____
Well Type: (check one) Oil Gas OG WSW Other: _____
 SWD Permit #: _____ ENHR Permit #: _____
 Gas Storage Permit #: _____
Spud Date: _____ Date Shut-In: _____

Table with 7 columns: Conductor, Surface, Production, Intermediate, Liner, Tubing. Rows include Size, Setting Depth, Amount of Cement, Top of Cement, Bottom of Cement.

Casing Fluid Level from Surface: _____ How Determined? _____ Date: _____
Casing Squeeze(s): _____ to _____ w / _____ sacks of cement, _____ to _____ w / _____ sacks of cement. Date: _____
Do you have a valid Oil & Gas Lease? Yes No
Depth and Type: Junk in Hole at _____ Tools in Hole at _____ Casing Leaks: Yes No Depth of casing leak(s): _____
Type Completion: ALT. I ALT. II Depth of: DV Tool: _____ w / _____ sacks of cement Port Collar: _____ w / _____ sack of cement
Packer Type: _____ Size: _____ Inch Set at: _____ Feet
Total Depth: _____ Plug Back Depth: _____ Plug Back Method: _____

Geological Date:

Table with 2 columns: Formation Name, Completion Information. Rows 1 and 2 for formation details.

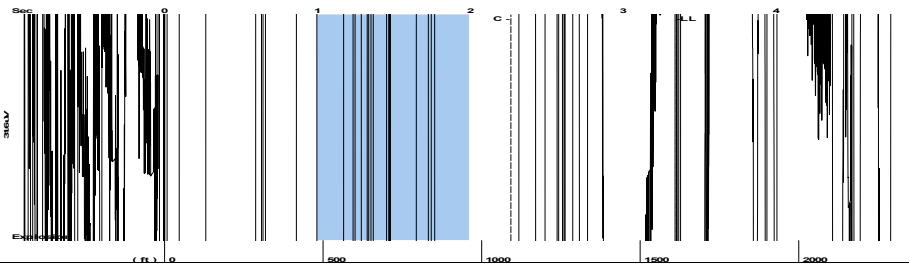
UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

Submitted Electronically

Form with fields: 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/No), Date.

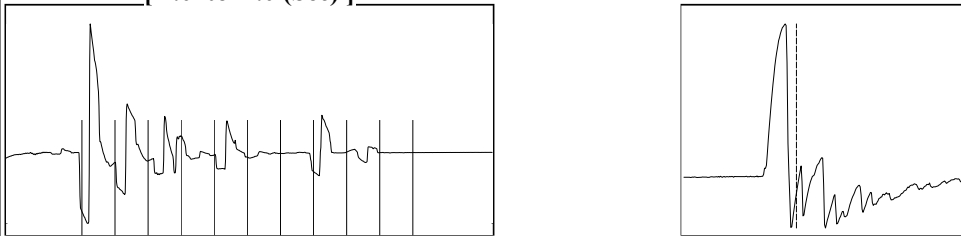
Mail to the Appropriate KCC Conservation Office:

Table with 2 columns: Office Address, Phone. Rows for KCC District Office #1, #2, #3, #4.

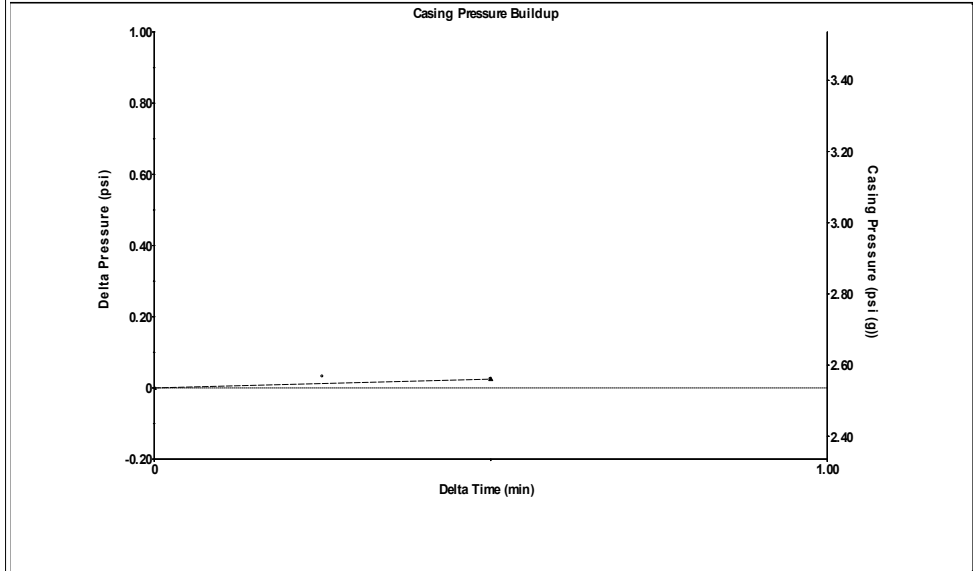


Filter Type High Pass Automatic Collar Count Yes Time 3.345 sec
 Manual Acoustic Veloc 932.353 ft/s Manual JTS/sec 14.7059 Joints 50.9022 Jts
 Depth 1613.60 ft

[1.0 to 2.0 (Sec)]

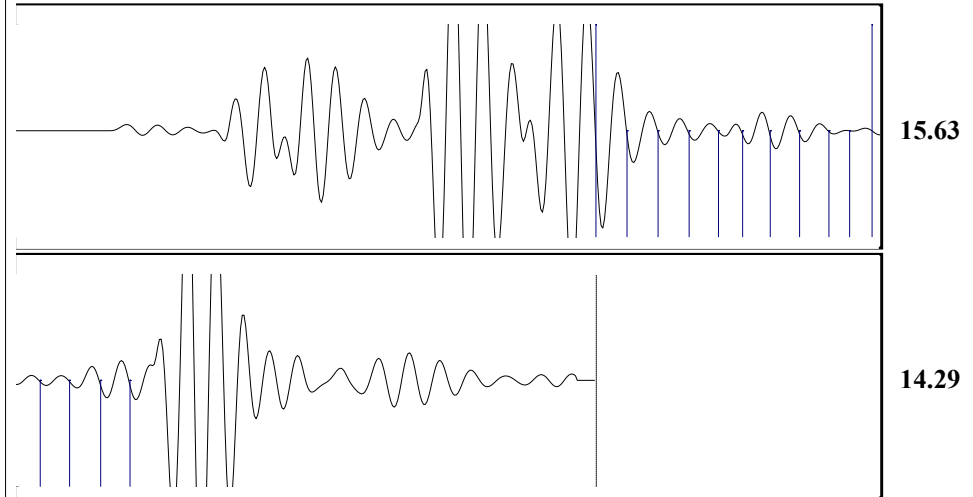


Analysis Method: Automatic



Change in Pressure 0.02 psi PT18514
 Range 0 - ? psi
 Change in Time 0.50 min

Production		Potential		Casing Pressure		Static	
Oil	- * -	- * -	BBL/D	2.5	psi (g)	Oil Column Height	MD 0 ft
Water	- * -	- * -	BBL/D	0.025	psi	Gas/Liquid Interface Pressure	0.50 min
Gas	- * -	- * -	Mscf/D	- * -	psi (g)	Liquid Level Depth	1613.60 ft
IPR Method		Vogel				Pump Intake Depth	- * - ft
PBHP/SBHP		- * -				Formation Depth	4325.00 ft
Production Efficiency		0.0				Static BHP	- * - psi (g)
Oil	40 deg.API						
Water	1.05 Sp.Gr.H2O						
Gas	1.00 Sp.Gr.AIR						
Acoustic Velocity	964.783 ft/s						



Acoustic Velocity 964.783 ft/s Joints counted 14
 Joints Per Second 15.2174 jts/sec Joints to liquid level 50.9022
 Depth to liquid level 1613.6 ft Filter Width 12.7059 16.7059
 Automatic Collar Count Yes Time to 1st Collar 1.344 2.264

July 07, 2023

Jose Reyes
American Warrior, Inc.
PO BOX 399
GARDEN CITY, KS 67846-0399

Re: Temporary Abandonment
API 15-185-11299-00-00
MCCANDLESS 7
SE/4 Sec.30-25S-13W
Stafford County, Kansas

Dear Jose Reyes:

"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"