

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: \_\_\_\_\_  
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)  
 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: \_\_\_\_\_

|                  | Conductor | Surface | Production | Intermediate | Liner | Tubing |
|------------------|-----------|---------|------------|--------------|-------|--------|
| 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: \_\_\_\_\_  
(top) (bottom) (top) (bottom)  
 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): \_\_\_\_\_  
(depth) (depth)  
 Type Completion:  ALT. I  ALT. II Depth of:  DV Tool: \_\_\_\_\_ w / \_\_\_\_\_ sacks of cement  Port Collar: \_\_\_\_\_ w / \_\_\_\_\_ sack of cement  
(depth) (depth)  
 Packer Type: \_\_\_\_\_ Size: \_\_\_\_\_ Inch Set at: \_\_\_\_\_ Feet  
 Total Depth: \_\_\_\_\_ Plug Back Depth: \_\_\_\_\_ Plug Back Method: \_\_\_\_\_

**Geological Data:**

| Formation Name | Formation Top | Formation Base | Completion Information   |
|----------------|---------------|----------------|--|
| 1. _____       | At: _____     | to _____ Feet  | Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet |
| 2. _____       | At: _____     | to _____ Feet  | Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet |

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

Submitted Electronically

|   |  |                |                     |                      |                                 |
|---|--|----------------|---------------------|----------------------|---------------------------------|
| <b>Do NOT Write in This Space - KCC USE ONLY</b>                                      | Date Tested: _____                         | Results: _____ | Date Plugged: _____ | Date Repaired: _____ | Date Put Back in Service: _____ |
|   | Review Completed by: _____ Comments: _____ |                |                     |                      |                                 |
| TA Approved: <input type="checkbox"/> Yes <input type="checkbox"/> Denied Date: _____ |  |                |                     |                      |                                 |

Mail to the Appropriate KCC Conservation Office:

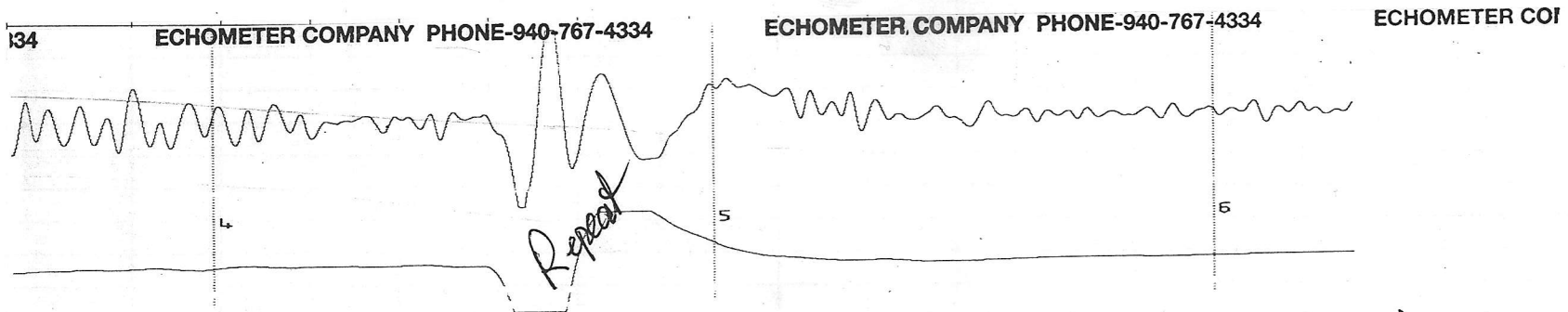
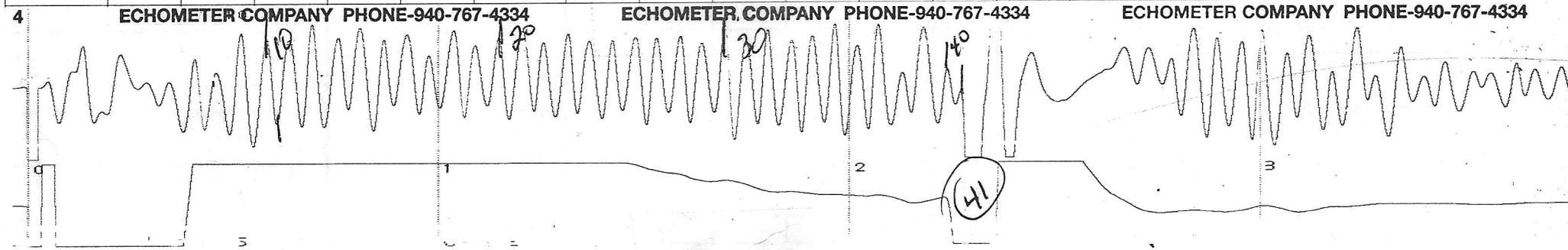
|  |  |                    |
|--|--|--------------------|
|  | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801               | Phone 620.682.7933 |
|  | KCC District Office #2 - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226 | Phone 316.337.7400 |
|  | KCC District 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 |

PRECISION WIRELINE and TESTING  
 P.O. BOX 560  
 LIBERAL, KANSAS 67905-0560  
 620-629-0204

PRODUCER RAMA OPERATING CO., INC.  
 WELL NAME ADAMS 8-11  
 LOCATION 11-35S-30W  
 COUNTY MEAD STATE KS

CSG \_\_\_\_\_ WT \_\_\_\_\_ SET @ \_\_\_\_\_ TD \_\_\_\_\_ PB \_\_\_\_\_ GL \_\_\_\_\_  
 TBG \_\_\_\_\_ WT \_\_\_\_\_ SET @ \_\_\_\_\_ SN \_\_\_\_\_ PKR \_\_\_\_\_ KB \_\_\_\_\_  
 PERFS TO \_\_\_\_\_ TO \_\_\_\_\_ TO \_\_\_\_\_ TO \_\_\_\_\_  
 PROVER \_\_\_\_\_ METER \_\_\_\_\_ TAPS \_\_\_\_\_ ORIFICE \_\_\_\_\_ PCR \_\_\_\_\_ TCR \_\_\_\_\_  
 GG \_\_\_\_\_ API \_\_\_\_\_ @ \_\_\_\_\_ GM \_\_\_\_\_ RESERVOIR \_\_\_\_\_

| DATE TIME OF READING | ELAP TIME HOUR | WELLHEAD PRESSURE DATA |                |          |                |          |                | MEASUREMENT DATA |       |      |        | LIQUIDS   |            | TYPE INITIAL _____ SPEICAL _____ ENDING _____<br>TEST: ANNUAL _____ RETEST _____ DATE <u>8-11-23</u> |        |          |
|----------------------|----------------|------------------------|----------------|----------|----------------|----------|----------------|------------------|-------|------|--------|-----------|------------|--|--------|----------|
|                      |                | CSG PSIG               | $\Delta P$ CSG | TBG PSIG | $\Delta P$ TBG | BHP PSIG | $\Delta P$ BHP | PRESS PSIG       | DIFF. | TEMP | Q MCFD | COND BBL. | WATER BBL. | REMARKS PERTINENT TO TEST DATA QUALITY   |        |          |
| FRIDAY               |                |                        |                |          |                |          |                |                  |       |      |        |           |            | ASSUME AVERAGE JT. LENGTH = 31.50'   |        |          |
| 8-11-23              |                |                        |                |          |                |          |                |                  |       |      |        |           |            | CONDUCT LIQUID LEVEL DETERMINATION TEST  |        |          |
| 0745                 |                | 0                      |                | PUMP OFF |                |          |                |                  |       |      |        |           |            | SHOT   | JTS TO | DISTANCE |
|                      |                |                        |                |          |                |          |                |                  |       |      |        |           |            | #  | FLUID  | TO FLUID |
|                      |                |                        |                |          |                |          |                |                  |       |      |        |           |            | 1  | 41.0   | 1292'    |
|                      |                |                        |                |          |                |          |                |                  |       |      |        |           |            | 2  | 41.0   | 1292'    |



|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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August 15, 2023

Robin L. Austin  
Rama Operating Co., Inc.  
P.O. Box 159  
101 S MAIN ST  
STAFFORD, KS 67578-1429

Re: Temporary Abandonment  
API 15-119-21145-00-00  
ADAMS 8-11  
NW/4 Sec.11-35S-30W  
Meade County, Kansas

Dear Robin L. Austin:

"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 04/01/2024.

- \* 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 04/01/2024.

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

Very truly yours,

Michael Maier"