

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
CASING MECHANICAL INTEGRITY TEST**

Form U-7
August 2019

Disposal: Enhanced Recovery: KCC District No.: _____
 Operator License No.: _____ Name: _____
 Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Contact Person: _____ Phone: (____) _____

API No.: _____ Permit No.: _____
 ___ - ___ - ___ - ___ Sec. ___ Twp. ___ S. R. ___ East West
 _____ Feet from North / South Line of Section
 _____ Feet from East / West Line of Section
 Lease: _____ Well No.: _____
 County: _____

Well Construction Details: New well Existing well with changes to construction Existing well with no changes to construction

Maximum Authorized Injection Pressure: _____ psi Maximum Injection Rate: _____ bbl/d

| | <i>Conductor</i> | <i>Surface</i> | <i>Intermediate</i> | <i>Production</i> | <i>Liner</i> | <i>Tubing</i> |
|------------------------|------------------|----------------|---------------------|-------------------|--------------|---------------|
| Size: _____ | _____ | _____ | _____ | _____ | _____ | Size: _____ |
| Set at: _____ | _____ | _____ | _____ | _____ | _____ | Set at: _____ |
| Sacks of Cement: _____ | _____ | _____ | _____ | _____ | _____ | Type: _____ |
| Cement Top: _____ | _____ | _____ | _____ | _____ | _____ | |
| Cement Bottom: _____ | _____ | _____ | _____ | _____ | _____ | |

Packer Type: _____ Set at: _____

DV Tool Port Collar Depth of: _____ feet with _____ sacks of cement TD (and plug back): _____ feet depth

Zone of Injection Formation: _____ Top Feet: _____ Bottom Feet: _____ Perf. or Open Hole: _____

Is there a Chemical Sealant or a Mechanical Casing patch in the annular space? Yes No

If Dual Completion - Injection is: Above Production Below Production

FIELD DATA

GPS Location: Datum: NAD27 NAD83 WGS84 Lat: _____ Long: _____ Date Acquired: _____

MIT Type: _____ MIT Reason: _____

Time in Minute(s): _____

Pressures: Set up 1 _____

Set up 2 _____

Set up 3 _____

Tested: Casing or Casing - Tubing Annulus System Pressure during test: _____ Bbls. to load annulus: _____

Test Date: _____ Using: _____ Company's Equipment

The zone tested for this well is between _____ feet and _____ feet.

The test results were verified by operator's representative:

Name: _____ Title: _____ Phone: (____) _____

| | |
|---|--|
| <p>KCC Office Use Only</p> <p>The results were:</p> <p><input type="checkbox"/> Satisfactory</p> <p><input type="checkbox"/> Not Satisfactory</p> <p>Next MIT: _____</p> | <p>State Agent: _____ Title: _____ Witness: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Remarks: _____</p> |
|---|--|

**KANSAS CORPORATION
COMMISSION**

266 N. Main St.
Suite 220
Wichita, KS 67202
Fax 316-337-6211



District #1, 210 E Frontview, Ste A, Dodge City KS 67801 620-682-7933
District #2 3450 N. Rock Rd. #601, Wichita, KS 67226 316-337-7400
District #3, 137 E 21st St., Chanute KS 66720 620-902-6450
District #4, 2301 E. 13th Hays KS 67601 785-261-6250
Check Appropriate District Office

Annular Additive Design Request

Company Name: Daystar Petroleum, Inc. License #: 30931
 Address: PO Box 560
 City/State/Zip: Eureka/KS/67045-0560
 Phone #: 620-583-5527 Email: matt@daystarpetroleum.com
 Contact Person: Matt Osborn Title: President
 Well Name: Jennings 3 API #: 15-159-21482-00-02
 Location: FSL 990 ' FEL 990 ' Qtr-Qtr-Qtr NW-SE-SE UIC Docket E-25196
 Section 20 Township 18S Range 6 E / W County: Rice
 Date of Failed MIT: 08/03/2023 Reason for Failure: Casing leak
 Location (depth) and Type of Leak: 1700-2023 (squeezed) old leak above 1,000'
 Method used to determine leak location: Packer and plug
 MIT failure bleed off rate from 300 psi to 100 psi in 1 minutes.
 Cemented intervals in well: 1700-2023 (200 sx and drilled out). 4.5 csg cement top est. 2490'
 Top & bottom of Fresh and Useable Ground Water: _____ Formation Name: _____
 Name of Additive to be used: Polymer water shut off treatment
 Well construction: Production casing size: 4.5 Tubing size & packer depth: 2 3/8 at 3075'
 Describe the Method of Additive Placement and Expected Quantity to be used: _____
1,000 gallons w/ packer fluid ahead of it. Leak blocking agent from 2,550' to surface.
Packer fluid will be from 2,550' to 3075'.

Today's date: 08 / 24 / 23 Expected Date to begin Procedure: 08 / 25 / 23

District Supervisor Approval for Additive Use.

Daystar Petroleum, Inc. is hereby approved to use the above named additive to restore Mechanical

Integrity in the JENNINGS 3 well on this day 8 / 24 / 2023

[Signature]
Authorized Signature

District Supervisor Note the above well must pass MIT after additive placement.