

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

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 _____ (depth) Tools in Hole at _____ (depth) 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
(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

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: <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

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

Form U-7
August 2019

Disposal: Enhanced Recovery: KCC District No.: 1
 Operator License No.: 6039 Name: L. D. Drilling, Inc.
 Address 1: 7 SW 26TH AVE
 Address 2: _____
 City: GREAT BEND State: KS Zip: 67530 + 6525
 Contact Person: Susan Schneweis Phone: (620) 793-3051

API No.: 15-135-00445-00-01 Permit No.: D20337.0
 NE SW SE NE Sec. 22 Twp. 18 S. R. 26 East West
2972 Feet from North / South Line of Section
929 Feet from East / West Line of Section
 Lease: DAY PAULS D Well No.: 1
 County: Ness

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

Maximum Authorized Injection Pressure: 250 psi Maximum Injection Rate: 1000 bbl/d

	Conductor	Surface	Intermediate	Production	Liner		Tubing
Size:	<u>NA</u>	<u>8.625</u>	<u>NA</u>	<u>5.5</u>	<u>NA</u>	Size:	<u>2.875</u>
Set at:		<u>307</u>		<u>1863</u>		Set at:	<u>1334</u>
Sacks of Cement:		<u>175</u>		<u>350</u>		Type:	<u>PLASTIC LINED</u>
Cement Top:		<u>0</u>		<u>0</u>			
Cement Bottom:		<u>307</u>		<u>1863</u>			

Packer Type: BAKER AD-1 TENSION Set at: 1334

DV Tool Port Collar Depth of: _____ feet with _____ sacks of cement TD (and plug back): 2047 (1832) feet depth

Zone of Injection Formation: CEDAR HILLS Top Feet: 1400 Bottom Feet: 1500 Perf. or Open Hole: Perf

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: 38.47316 Long: -100.1769 Date Acquired: 07/07/2015

MIT Type: Tubing and Packer (or Initial Pressure) Test MIT Reason: 5-YEAR TEST

Time in Minute(s):	<u>0</u>	<u>15</u>	<u>30</u>			
Pressures: Set up 1	<u>340</u>	<u>340</u>	<u>340</u>			
Set up 2						
Set up 3						

Tested: Casing or Casing - Tubing Annulus System Pressure during test: 0 Bbls. to load annulus: 0

Test Date: 07/08/2020 Using: Gabel Lease Service, Inc. Company's Equipment

The zone tested for this well is between 0 feet and 1390 feet.

The test results were verified by operator's representative:

Name: Mike Kasselman Title: Production Supervisor Phone: (620) 793-3051

KCC Office Use Only

State Agent: Mike Maier Title: E.C.R.S. Witness: Yes No

The results were:

- Satisfactory
 Not Satisfactory

Next MIT: 07/07/2025

Remarks: 5yr retest, nothing done to well since last test.

11/08/2023

Rashell Patten
L. D. Drilling, Inc.
7 SW 26 Ave
GREAT BEND, KS 67530-6525

Re: Temporary Abandonment
API 15-135-00445-00-01
DAY PAULS D 1
NE/4 Sec.22-18S-26W
Ness County, Kansas

Dear Rashell Patten:

"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 06/03/2024.

- * 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 06/03/2024.

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

Very truly yours,

Michael Maier"