Form CF-111 July 2017 Form must be Typed Form must be signed

## TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

Phone 620.902.6450

Phone 785.261.6250

| OPERATOR: License#   |                     |   |            | API No. 15   |   |                     |                         |  |
|--|---------------------|---|------------|--|---|---------------------|-------------------------|--|
| OPERATOR: License#   |                     |   |            | API No. 15-  Spot Description:                                     |   |                     |                         |  |
| Address 1:   |                     |   |            |  | •   |                     | R DE                    |  |
|  |                     |   |            |  |   |                     | I / S Line of Section   |  |
| Address 2:   |                     |   |            | feet from E / W Line of Section                                    |   |                     |                         |  |
| Contact Person:  |                     |   |            | GPS Location: Lat:, Long:  |   |                     |                         |  |
| Phone:( )  |                     |   |            | Datum:         NAD27         NAD83         WGS84           County: |   |                     |                         |  |
|  |                     |   |            |  | ie: Eie   |                     |                         |  |
|  |                     |   |            |  |   |                     | Other:                  |  |
|  |                     |   |            | SWD Permit #: ENHR Permit #:                                       |   |                     |                         |  |
|  |                     |   |            |  | orage Permit #:                                       |                     |                         |  |
|  |                     |   |            | Spud Date:   |   | Date Shut-In:       |                         |  |
|  | Conductor           | Surface                                     | Pro        | oduction   | Intermediate  | Liner               | Tubing                  |  |
| Size   |                     |   |            |  |   |                     |                         |  |
| Setting Depth  |                     |   |            |  |   |                     |                         |  |
| Amount of Cement   |                     |   |            |  |   |                     |                         |  |
| Top of Cement  |                     |   |            |  |   |                     |                         |  |
| Bottom of Cement   |                     |   |            |  |   |                     |                         |  |
| Casing Fluid Level from Sur  | rface:              | How De                                      | etermined? | ı  |   | Г                   | Date:                   |  |
| Casing Fluid Level from Surface:       How Determined?       Date: |                     |   |            |  |   |                     |                         |  |
|  |                     | _   |            | (top)  | (bottom)  |                     |                         |  |
| Do you have a valid Oil & G  | as Lease? Yes       | No  |            |  |   |                     |                         |  |
| Depth and Type:  | in Hole at          | Tools in Hole at                            | Ca         | sing Leaks:  | Yes No Depth of                                       | casing leak(s):     |                         |  |
| Type Completion: ALT   |                     |   |            |  |   |                     |                         |  |
| Packer Type:   |                     |   |            |  |   | (depth)             |                         |  |
|  |                     |   |            |  |   |                     |                         |  |
| Total Depth:   | Plug Bac            | к Deptn:                                    |            | Plug Back Metr   | lod:  |                     |                         |  |
| Geological Date:   |                     |   |            |  |   |                     |                         |  |
| Formation Name Formation Top Formation Base Completion Information |                     |   |            |  |   |                     |                         |  |
| 1  | At: to Feet Perfor  |   |            |  | ration Interval to Feet or Open Hole Interval to Feet |                     |                         |  |
| 2  | At: to Feet Perfora |   |            |  | ration Interval to Feet or Open Hole Interval to Feet |                     |                         |  |
| LINDED DENALTY OF DEE  |                     |   |            |  |   |                     |                         |  |
| TIMINED BENKET VAL BEE   | THE THEBESO ATTE    |   |            |  |   | BEATTA THE BEET     | AE MV PRIMINI ENGE      |  |
|  |                     | Submit                                      | ted Ele    | ctronicall   | у   |                     |                         |  |
|  |                     |   |            |  |   |                     |                         |  |
| Do NOT Write in This   | Date Tested:        | Б   | lesults:   |  | Date Plugged: I                                       | Date Repaired: Date | te Put Back in Service: |  |
| Space - KCC USE ONLY   |                     | ľ   | lesuits.   |  | Date Flugged.   | Date Repaired. Dat  | te Fut back in Service. |  |
| •  |                     |   |            |  |   |                     |                         |  |
| Review Completed by:   |                     |   | Comn       | nents:   |   |                     |                         |  |
| TA Approved: Yes   | Denied Date:        |   |            |  |   |                     |                         |  |
|  |                     | Mail to the App                             | propriate  | KCC Conserv  | vation Office:  |                     |                         |  |
| Object Sales Seen Sales Sales See See Seed Seeds Ma                | KCC Distri          | ct Office #1 - 210 E. Fro                   | ntview, Su | te A, Dodge City, KS 67801   |   |                     | Phone 620.682.7933      |  |
|  | KCC Distri          | KCC District Office #2 - 3450 N. Rock Road, |            |  | Suite 601, Wichita. KS 67                             | Phone 316.337.7400  |                         |  |

KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720

KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651

Conservation Division District Office No. 3 137 E. 21st Street Chanute, KS 66720



Phone: 620-902-6450 http://kcc.ks.gov/

Laura Kelly, Governor

Andrew J. French, Chairperson Dwight D. Keen, Commissioner Annie Kuether, Commissioner

11/09/2023

Roscoe G. Jackson II Jackson Brothers, L.L.C. 116 E 3RD ST EUREKA, KS 67045-1747

Re: Temporary Abandonment API 15-073-30360-00-00 OLSEN B 5 SE/4 Sec.11-25S-08E Greenwood County, Kansas

Dear Roscoe G. Jackson II:

"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 11/09/2024.

- \* 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 11/09/2024.

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

Very truly yours,

Thad Triboulet ECRS"