## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License#<br>Name: |  |             |                | API No. 15-          | API No. 15   |                          |               |  |  |  |
|-----------------------------|--|-------------|----------------|----------------------|--|--------------------------|---------------|--|--|--|
|                             |  |             |                | Spot Descri          |  |                          |               |  |  |  |
| Address 1:                  |  |             |                |                      | Se   | ec Twp S.                | R 🗌 E 🗌 W     |  |  |  |
| Address 2:                  |  |             |                |                      |  | feet from N              |               |  |  |  |
| City:                       | State:                                 | Zip:        | +              |                      | GPS Location: Lat:, Long:  |                          |               |  |  |  |
| Contact Person:             |  |             |                |                      | GPS Location: Lat:      , Long:         Datum:       NAD27       NAD83       WGS84         County:        Elevation: |                          |               |  |  |  |
|                             |  |             |                |                      |  |                          |               |  |  |  |
| Contact Person Email:       |  |             |                | Lease Nam            | e:   | We                       | II #:         |  |  |  |
| Field Contact Person:       |  |             |                |                      | Well Type: (check one)         Oil         Gas         OG         WSW         Other:                                 |                          |               |  |  |  |
| Field Contact Person Phon   | e:()                                   |             |                |                      |  |                          |               |  |  |  |
|                             | ····· · ······························ |             |                |                      | Gas Storage Permit #:      Spud Date: Date Shut-In:  |                          |               |  |  |  |
| <b>F</b>                    | [                                      |             |                | Opud Date.           |  |                          |               |  |  |  |
|                             | Conductor                              | Surfa       | се             | Production           | Intermedia   | ate Liner                | Tubing        |  |  |  |
| Size                        |  |             |                |                      |  |                          |               |  |  |  |
| Setting Depth               |  |             |                |                      |  |                          |               |  |  |  |
| Amount of Cement            |  |             |                |                      |  |                          |               |  |  |  |
| Top of Cement               |  |             |                |                      |  |                          |               |  |  |  |
| Bottom of Cement            |  |             |                |                      |  |                          |               |  |  |  |
| Casing Fluid Level from Su  | rface:                                 |             | _ How Detern   | nined?               |  | [                        | Date:         |  |  |  |
| Casing Squeeze(s):          | to w                                   |             | sacks of cemer | nt, to               | (bottom) w /   | sacks of cement.         | Date:         |  |  |  |
| Do you have a valid Oil & O | Gas Lease? 🗌 Yes                       | No          |                |                      |  |                          |               |  |  |  |
| Depth and Type: 🗌 Junk      | in Hole at                             | Tools in Ho | e at           | Casing Leaks:        | Yes No   | Depth of casing leak(s): |               |  |  |  |
| Type Completion AL          | (depth)                                | of DV Too   | (depth)<br>I·  | w/ sacks             | s of cement  | Port Collar: w /         | sack of cemen |  |  |  |
| Packer Type:                |  |             |                |                      |  |                          |               |  |  |  |
|                             |  |             |                |                      |  |                          |               |  |  |  |
| Total Depth:                | Plug B                                 | ack Depth:  |                | Plug Back Meth       | od:  |                          |               |  |  |  |
| Geological Date:            |  |             |                |                      |  |                          |               |  |  |  |
|                             | Formation Top Formation Base           |             |                |                      | Completion Information   |                          |               |  |  |  |
| Formation Name              |  | 1           | Foot           | Derferation Interval | to   | Feet or Open Hole Interv | al to Eool    |  |  |  |
| Formation Name 1            | At:                                    | to          |                | Perioration Interval |  |                          |               |  |  |  |

## Submitted Electronically

| Do NOT Write in This<br>Space - KCC USE ONLY | Date Tested: | Results:  | Date Plugged: | Date Repaired: | Date Put Back in Service: |
|--|--------------|-----------|---------------|----------------|---------------------------|
| Review Completed by:                         |              | Comments: |               |                |                           |
| TA Approved: Yes                             | Denied Date: |           |               |                |                           |

## Mail to the Appropriate KCC Conservation Office:

| There have been now the last and have grown many there have  | 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 |
| Image: Note of the state         Image: | KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720                            | Phone 620.902.6450 |
| State         State <th< td=""><td>KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651</td><td>Phone 785.261.6250</td></th<>   | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651                      | Phone 785.261.6250 |

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



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

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

11/27/2023

Lucas Humerickhouse LH Oil, LLC 2929 NEVADA TER OTTAWA, KS 66067-8407

Re: Temporary Abandonment API 15-059-22392-00-00 WESTERN UNIVERSITY C 17 A NE/4 Sec.21-17S-21E Franklin County, Kansas

Dear Lucas Humerickhouse:

"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 11/27/2024.

\* 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 11/27/2024.

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

Very truly yours,

Keith Carswell ECRS"