## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License# Name: Address 1: |                              |               |              | API No. 15-            | API No. 15-         Spot Description:   |                             |        |          |  |  |
|-------------------------------------|------------------------------|---------------|--------------|------------------------|---|-----------------------------|--------|----------|--|--|
|                                     |                              |               |              | Spot Descr             |   |                             |        |          |  |  |
|                                     |                              |               |              | _                      |   |                             |        |          |  |  |
| Address 2:                          |                              |               |              | _                      |   | feet from N /               |        |          |  |  |
| City:                               | State:                       | Zip:          | +            | 0001000                | feet from E / W Line of Section   |                             |        |          |  |  |
| Contact Person:                     |                              |               |              | GPS Local              | GPS Location: Lat:      , Long:         Datum:       NAD27         NAD27       WGS84         County:          Elevation:          Well #: |                             |        |          |  |  |
|                                     |                              |               |              |                        |   |                             |        |          |  |  |
|                                     |                              |               |              |                        |   |                             |        |          |  |  |
| Field Contact Person:               |                              |               |              | Well Type: (           | (check one) 🗌 🤇   | Dil 🗌 Gas 🗌 OG 🗌 WSW 📃 O    | ther:  |          |  |  |
| Field Contact Person Phone          |                              |               |              |                        | SWD Permit #: ENHR Permit #:  |                             |        |          |  |  |
|                                     | //()                         |               |              |                        |   |                             |        |          |  |  |
|                                     |                              |               |              | Spud Date:             |   | Date Shut-In:               |        |          |  |  |
|                                     | Conductor                    | Surface       | e            | Production             | Intermedia  | ate Liner                   | Tubing | J        |  |  |
| Size                                |                              |               |              |                        |   |                             |        |          |  |  |
| Setting Depth                       |                              |               |              |                        |   |                             |        |          |  |  |
| Amount of Cement                    |                              |               |              |                        |   |                             |        |          |  |  |
| Top of Cement                       |                              |               |              |                        |   |                             |        |          |  |  |
| Bottom of Cement                    |                              |               |              |                        |   |                             |        |          |  |  |
| Casing Fluid Level from Sur         | rface:                       |               | How Determir | ned?                   |   | Date                        | e:     |          |  |  |
| 0                                   |                              |               |              |                        |   | sacks of cement. Dat        |        |          |  |  |
| Do you have a valid Oil & Ga        | as Lease? 🗌 Yes              | No            |              |                        |   |                             |        |          |  |  |
| Depth and Type: 🗌 Junk i            | in Hole at                   | Tools in Hole | at           | Casing Leaks:          | Yes No  | Depth of casing leak(s):    |        |          |  |  |
|                                     |                              |               |              |                        |   |                             |        |          |  |  |
|                                     |                              |               |              |                        |   | Port Collar: w /            | Sack U | n cement |  |  |
| Packer Type:                        | Size: _                      |               |              | Inch Set at:           |   | _ Feet                      |        |          |  |  |
| Total Depth:                        | Plug B                       | ack Depth:    |              | Plug Back Meth         | od:   |                             |        |          |  |  |
| Geological Date:                    |                              |               |              |                        |   |                             |        |          |  |  |
|                                     | Formation Top Formation Base |               |              | Completion Information |   |                             |        |          |  |  |
| Formation Name                      |                              |               | Foot F       | Perforation Interval   | to  | Feet or Open Hole Interval_ | to     | Feet     |  |  |
| Formation Name                      | At:                          | to            |              | choradon interval      |   |                             |        | 1 000    |  |  |

## Submitted Electronically

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

Conservation Division District Office No. 1 210 E. Frontview, Suite A Dodge City, KS 67801



Phone: 620-682-7933 http://kcc.ks.gov/

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

11/30/2023

STEPHANIE DECKER Samuel Gary Jr. & Associates, Inc. 1515 WYNKOOP, STE 700 DENVER, CO 80202-2062

Re: Temporary Abandonment API 15-119-20593-00-02 STEVENS (MORROW) UNIT SMU 305 NW/4 Sec.03-33S-30W Meade County, Kansas

Dear STEPHANIE DECKER:

"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 11/30/2024.

\* 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 11/30/2024.

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

Very truly yours,

Michael Maier"