KOLAR Document ID: 1740532

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

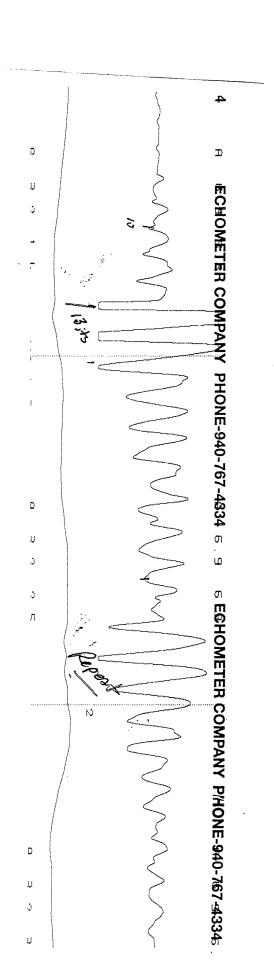
Form CP-111
July 2017
Form must be Typed
Form must be signed
All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

|   |                    |                    |         | l , <u>.</u>  |                        |                   |                                 |  |          |   |
|---|--------------------|--------------------|---------|---|------------------------|-------------------|---------------------------------|--|----------|---|
| OPERATOR: License#  |                    |                    |         | API No. 15-   |                        |                   |                                 |  |          |   |
| Name:   |                    |                    |         | 1 .   | iption:                |                   |                                 |  |          |   |
| Address 1:  |                    |                    |         |   | · Sec                  | •                 |                                 | _  |          |   |
| Address 2:  |                    |                    |         | feet from N / S Line of Section feet from E / W Line of Section |                        |                   |                                 |  |          |   |
| City:   |                    |                    |         |   | on: Lat:               |                   |                                 |  |          |   |
| Contact Person:   |                    |                    |         | Datum:  | (e.g. xx.) NAD27 NAD83 | WGS84             | (e.g                            | gxxx.xxxxx)  |          |   |
| Phone: ( )  |                    |                    |         | County: Elevation: GL KB Lease Name: Well #:                    |                        |                   |                                 |  |          |   |
|   |                    |                    |         |   |                        |                   |                                 |  |          | Well Type: (check one)  Oil  Gas  OG  WSW  Other: |
|   |                    |                    |         | Field Contact Person Phone: (                                   | ()                     |                   |                                 | ☐ SWD Permit #:         ☐ ENHR Permit #:           ☐ Gas Storage Permit #: |          |   |
|   |                    |                    |         |   | orage Permit #:        |                   | ·In:                            |  |          |   |
|   | Conductor          | Surface            | Pro     | oduction  | Intermediate           | Liner             |                                 | Tubing   |          |   |
| Size  |                    |                    |         |   |                        |                   |                                 |  |          |   |
| Setting Depth   |                    |                    |         |   |                        |                   |                                 |  |          |   |
| Amount of Cement  |                    |                    |         |   |                        |                   |                                 |  |          |   |
| Top of Cement   |                    |                    |         |   |                        |                   |                                 |  |          |   |
| Bottom of Cement  |                    |                    |         |   |                        |                   |                                 |  |          |   |
| Do you have a valid Oil & Gas  Depth and Type:  Junk in I  Type Completion:  ALT. I  Packer Type: | Hole at            | Tools in Hole at   | w/_     | sacks   | s of cement Port       | Collar:(depth)    |                                 |  | f cement |   |
| • •   |                    |                    |         |   |                        |                   |                                 |  |          |   |
| Total Depth:  | Plug Back          | Depth:             |         | Plug Back Metho   | od:                    |                   |                                 |  |          |   |
| Geological Date:  |                    |                    |         |   |                        |                   |                                 |  |          |   |
| Formation Name  | Formation To       | op Formation Base  |         |   | Completic              | on Information    |                                 |  |          |   |
| 1   | At:                | to Feet            | Perfo   | ration Interval _   | to F                   | Feet or Open Hole | Interval                        | to   | Feet     |   |
| 2   | At:                | to Feet            | Perfo   | ration Interval_  | to F                   | Feet or Open Hole | Interval                        | to   | Feet     |   |
|   |                    |                    |         |   |                        |                   |                                 |  |          |   |
| IINDED DENALTY OF DED II  | IDV I LEBEDV ATTEC | T TUAT TUE INCODMA | TION CO | NITAINEN HED  | EIN ISTOLIE AND C      | CODDECT TO THE I  | DECT OF MI                      | A NIVINI EI  | DOE      |   |
|   |                    | Submitte           | ed Ele  | ctronically   | y                      |                   |                                 |  |          |   |
| Do NOT Write in This<br>Space - KCC USE ONLY  |                    |                    | esults: |   | Date Plugged:          | Date Repaired:    | ired: Date Put Back in Service: |  |          |   |
| Review Completed by:  |                    |                    | Comm    | nents:  |                        |                   |                                 |  |          |   |
| TA Approved: Yes  | Denied Date: _     |                    |         |   |                        |                   |                                 |  |          |   |

## Mail to the Appropriate KCC Conservation Office:

| Name have been now toke on and from boungs und was been been   | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801               | Phone 620.682.7933 |
|--|--|--------------------|
| 1000 1000 1000 1000 1000 1000 1000 100   | KCC District Office #2 - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226 | Phone 316.337.7400 |
| The second of th | KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720                            | Phone 620.902.6450 |
| Size State S | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651                      | Phone 785.261.6250 |



Conservation Division District Office No. 2 3450 N. Rock Road Building 600, Suite 601 Wichita, KS 67226



Phone: 316-337-7400 http://kcc.ks.gov/

Laura Kelly, Governor

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

12/15/2023

Dan Gillespie M & D Oil and Gas, LLC PO Box 181 STERLING, KS 67579-1712

Re: Temporary Abandonment API 15-159-21619-00-00 NEEL A 1 SW/4 Sec.24-19S-06W Rice County, Kansas

## Dear Dan Gillespie:

Your application for Temporary Abandonment (TA) for the above-listed well is denied for the following reasons(s):

## **High Fluid Level**

Pursuant to K.A.R. 82-3-111, the well must be plugged, or returned to service, or obtain temporary abandonment status by 01/14/2024.

This deadline does NOT override any compliance deadline given to you in any Commission Order.

You may contact me if you have any questions.

Sincerely, Keith Karlin, ECRS KCC DISTRICT 2