KOLAR Document ID: 1765360

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License#                           |                     |                              |         | AP              | No. 15  |                |                     |             |            |              |           |  |
|--|---------------------|------------------------------|---------|-----------------|---|----------------|---------------------|-------------|------------|--------------|-----------|--|
| Name:  |                     |                              |         |                 | ot Descrin  | otion:         |                     |             |            |              |           |  |
| Address 1:                                   |                     |                              |         | '               |   | Sec            |                     |             |            |              | E W       |  |
| Address 2:                                   |                     |                              |         |                 |   |                |                     |             |            |              |           |  |
| City: State: Zip: +                          |                     |                              |         |                 | feet from E / W Line of Section   |                |                     |             |            |              |           |  |
|  |                     |                              |         | G               | GPS Location: Lat:, Long:   |                |                     |             |            |              |           |  |
| Contact Person: Phone:( )                    |                     |                              |         |                 | Datum:         NAD27         NAD83         WGS84           County:         Elevation:         GL         KB |                |                     |             |            |              |           |  |
| Contact Person Email:                        |                     |                              |         |                 |   | :              |                     |             |            |              |           |  |
| Field Contact Person:                        |                     |                              |         | 10/0            | II Type: <i>(c</i>  | heck one) 🗌 Oi | I Gas               | OG W        | SW Oth     | er:          |           |  |
| Field Contact Person Phone:                  |                     | SWD Permit #: ENHR Permit #: |         |                 |   |                |                     |             |            |              |           |  |
| riela Contact Person Priorie.                | ()                  |                              |         | $-\mid \square$ | Gas Stor  | age Permit #:  |                     |             |            |              |           |  |
|  |                     |                              |         | Spi             | ıd Date:_   |                |                     | Date Shut-  | ln:        |              |           |  |
|  | Conductor           | Surface                      |         | Production      | ı   | Intermediate   | 9                   | Liner       |            | Tubing       | j         |  |
| Size   |                     |                              |         |                 |   |                |                     |             |            |              |           |  |
| Setting Depth                                |                     |                              |         |                 |   |                |                     |             |            |              |           |  |
| Amount of Cement                             |                     |                              |         |                 |   |                |                     |             |            |              |           |  |
| Top of Cement                                |                     |                              |         |                 |   |                |                     |             |            |              |           |  |
| Bottom of Cement                             |                     |                              |         |                 |   |                |                     |             |            |              |           |  |
| Depth and Type:                              | ALT. II Depth Size: | of: DV Tool: _               | (depth) | w /             | sacks   | of cement P    | ort Collar:<br>Feet |             |            |              | of cement |  |
| Formation Name                               | Formation           | Top Formation E              | Base    |                 |   | Compl          | etion Inform        | mation      |            |              |           |  |
| 1  | At:                 | to                           | Feet    | Perforation     | nterval _   | to             | _ Feet or           | Open Hole   | Interval   | to           | Feet      |  |
| 2  | At:                 | to                           | _ Feet  | Perforation     | interval _  | to             | _ Feet or           | Open Hole   | Interval   | to           | Feet      |  |
| HINDED DENALTY OF DED I                      | IIIDV I LIEDEDV ATT |                              | bmitted |                 |   |                | COBBE               | OT TO THE I | DEST OF MA | A IANUMII E  | :DOE      |  |
| Do NOT Write in This<br>Space - KCC USE ONLY |                     |                              |         | 5:              |   | Date Plugged   | l: Date             | Repaired:   | Date Put   | Back in Serv | /ice:     |  |
| Review Completed by:                         |                     |                              | (       | Comments:       |   |                |                     |             |            |              |           |  |
| TA Approved: Yes                             | Denied Date:        |                              |         |                 |   |                |                     |             |            |              |           |  |
|  |                     |                              |         |                 |   |                |                     |             |            |              |           |  |

## Mail to the Appropriate KCC Conservation Office:

| from their trees now make the new facts among many from their trees.  | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801               | Phone 620.682.7933 |  |  |
|---|--|--------------------|--|--|
| No.   No. | 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 |  |  |
| See   | 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/

Laura Kelly, Governor

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

## 03/05/2024

Lisa Jones Pantera Energy Company 817 S POLK ST STE 201 Amarillo, TX 79101-3433

Re: Temporary Abandonment API 15-175-21441-00-00 SANTA FE E 2 NW/4 Sec.06-32S-33W Seward County, Kansas

## Dear Lisa Jones:

"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 03/05/2025.

- \* 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 03/05/2025.

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

Very truly yours,

Michael Maier"