KOLAR Document ID: 1769859

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

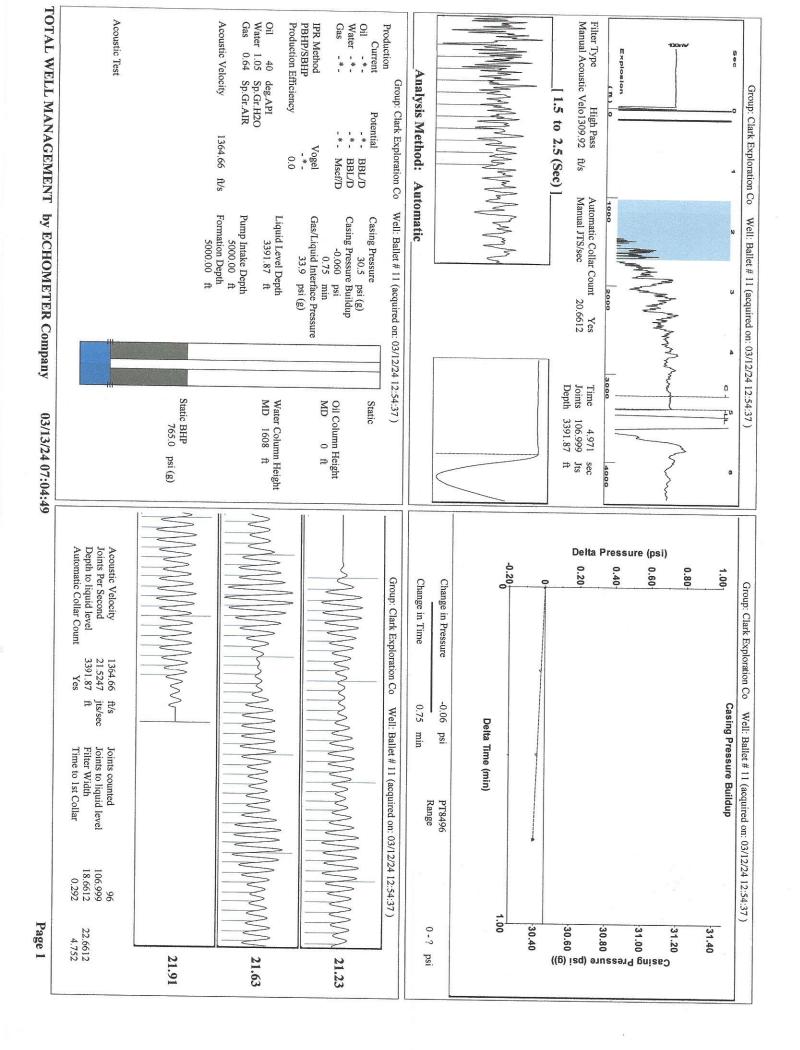
Form CP-111
July 2017
Form must be Typed
Form must be signed
All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License#                            |   |                                  |            |                        | API No. 15-       |             |                       |              |                           |            |         |
|---|---|----------------------------------|------------|------------------------|-------------------|-------------|-----------------------|--------------|---------------------------|------------|---------|
| Name:   |   |                                  |            |                        | Spot Description: |             |                       |              |                           |            |         |
| Address 1:                                    |   |                                  |            |                        |                   | Sec         |                       |              |                           |            | W       |
| Address 2:                                    |   |                                  |            |                        |                   |             |                       | feet from    | □ N / [                   | S Line of  | Section |
| City:   |   | feet from DE / W Line of Section |            |                        |                   |             |                       |              |                           |            |         |
| Contact Person:                               | GPS Location: Lat:                                |                                  |            |                        |                   |             |                       |              |                           |            |         |
| Phone:( )                                     |   |                                  |            |                        |                   |             |                       |              |                           |            |         |
| Contact Person Email:                         |   |                                  |            |                        |                   |             |                       |              |                           |            |         |
|   | Well Type: (check one)  Oil  Gas  OG  WSW  Other: |                                  |            |                        |                   |             |                       |              |                           |            |         |
| Field Contact Person:                         | SWD Permit #: ENHR Permit #:                      |                                  |            |                        |                   |             |                       |              |                           |            |         |
| Field Contact Person Phone                    |   |                                  |            |                        |                   |             |                       |              |                           |            |         |
|   |   |                                  |            |                        | Spud Date:        |             |                       | _ Date Shut  | -ln:                      |            |         |
|   | Conductor   | Surfa                            | ace        | Pro                    | duction           | Intermedia  | te                    | Liner        |                           | Tubing     |         |
| Size  |   |                                  |            |                        |                   |             |                       |              |                           |            |         |
| Setting Depth                                 |   |                                  |            |                        |                   |             |                       |              |                           |            |         |
| Amount of Cement                              |   |                                  |            |                        |                   |             |                       |              |                           |            |         |
| Top of Cement                                 |   |                                  |            |                        |                   |             |                       |              |                           |            |         |
| Bottom of Cement                              |   |                                  |            |                        |                   |             |                       |              |                           |            |         |
| Do you have a valid Oil & Ga  Depth and Type: | n Hole at(depth) IALT. II Depth                   | Tools in Ho                      | ol:(depth) | w / _<br>Inch          | sacks<br>Set at:  | s of cement | Port Collar<br>- Feet |              |                           |            | cemen   |
| тогат Бертт                                   | Flug ba   | ск Беріп                         | -          |                        | Tug back wein     | ou          |                       | _            |                           |            |         |
| Geological Date:                              |   |                                  |            |                        |                   |             |                       |              |                           |            |         |
| Formation Name                                | Formation Top Formation Base                      |                                  |            | Completion Information |                   |             |                       |              |                           |            |         |
| 1   | At:   | to                               | Feet       | Perfo                  | ration Interval _ | to          | Feet o                | r Open Hole  | Interval                  | to         | Feet    |
| 2   | At:   | to                               | Feet       | Perfo                  | ration Interval _ | to          | Feet o                | r Open Hole  | Interval                  | to         | Feet    |
| INDED DENALTY OF BED                          | HIDVI LIEDEDV ATTE                                |                                  |            |                        | ctronically       |             |                       | ECTTOTUE     | DECT OF M                 | V VNOMI ER | VCE     |
| Do NOT Write in This<br>Space - KCC USE ONLY  | Date Tested:                                      |                                  | Results:   |                        |                   | Date Plugge | d: Da                 | te Repaired: | Date Put Back in Service: |            | :<br>:: |
| Review Completed by:                          |   |                                  |            | _ Comm                 | ients:            |             |                       |              |                           |            |         |
| TA Approved: Yes                              | Denied Date:                                      |                                  |            |                        |                   |             |                       |              |                           |            |         |
|   |   |                                  |            |                        |                   |             |                       |              |                           |            |         |

## Mail to the Appropriate KCC Conservation Office:

| States States States States State State State States State | 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 |
| Similar Date   State   | 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

## 03/27/2024

Kathleen Clark Clark, Curtis dba Clark Exploration Co. 9362 LOGGIA ST UNIT A HIGHLANDS RANCH, CO 80126-7645

Re: Temporary Abandonment API 15-007-20045-00-00 BALLET RANCH A 11 SE/4 Sec.32-34S-15W Barber County, Kansas

## Dear Kathleen Clark:

- "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 03/27/2025.
- \* 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 03/27/2025.

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

Very truly yours,

Michael Maier"