## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License#                 |                                   |                |               |                        | API No. 15   |                  |              |                |          |      |        |        |
|------------------------------------|-----------------------------------|----------------|---------------|------------------------|--|------------------|--------------|----------------|----------|------|--------|--------|
|                                    |                                   |                |               |                        |  |                  |              |                |          |      |        |        |
| Address 1:                         |                                   |                |               |                        |  | Se               | ec           | Twp            | S. R     |      | _ 🗌 E  | W      |
| Address 2:                         |                                   |                |               |                        |  |                  |              |                | 4        |      |        |        |
| City:                              | State:                            | Zip:           | +             |                        | feet from L E / L W Line of Section                        |                  |              |                |          |      |        |        |
| Contact Person:                    |                                   |                |               |                        | GPS Location: Lat:, Long:, Long:, Datum: NAD27 NAD83 WGS84 |                  |              |                |          |      |        |        |
| Phone:( )                          |                                   |                |               |                        |  |                  |              |                |          |      | GL     | КВ     |
| Contact Person Email:              |                                   |                |               |                        | Lease Nam  | e:               |              |                | Well #:  |      |        |        |
| Field Contact Person:              |                                   |                |               |                        | Well Type: (   | check one) 🗌     | Oil Gas      | ] og 🗌 wsw     | /        | her: |        |        |
| Field Contact Person Phone         | e: ( )                            |                |               |                        |  | ermit #:         |              |                | Permit # | ŧ:   |        |        |
|                                    | ()                                |                |               |                        |  | orage Permit #:_ |              |                |          |      |        |        |
|                                    |                                   |                |               |                        | Spud Date:   |                  |              | Date Shut-In:  |          |      |        |        |
|                                    | Conductor                         | Surfa          | ce            | Proc                   | duction  | Intermedi        | iate         | Liner          |          |      | Tubing |        |
| Size                               |                                   |                |               |                        |  |                  |              |                |          |      |        |        |
| Setting Depth                      |                                   |                |               |                        |  |                  |              |                |          |      |        |        |
| Amount of Cement                   |                                   |                |               |                        |  |                  |              |                |          |      |        |        |
| Top of Cement                      |                                   |                |               |                        |  |                  |              |                |          |      |        |        |
| Bottom of Cement                   |                                   |                |               |                        |  |                  |              |                |          |      |        |        |
| Casing Fluid Level from Sur        | face:                             |                | _ How Deter   | rmined?                |  |                  |              |                | Date     | :    |        |        |
| Casing Squeeze(s):                 | to w                              |                | sacks of ceme | ent,                   | to   | (bottom) w /     |              | acks of cemer  | nt. Date | :    |        |        |
| Do you have a valid Oil & G        | as Lease? 🗌 Yes                   | No             |               |                        |  |                  |              |                |          |      |        |        |
| Depth and Type: 🗌 Junk i           | n Hole at                         | Tools in Ho    | e at          | Cas                    | ing Leaks:   | Yes No           | Depth of cas | sing leak(s):  |          |      |        |        |
| Type Completion:                   |                                   |                |               |                        |  |                  |              |                |          |      |        | cement |
| Packer Type:                       |                                   |                | ,             |                        |  |                  |              | (depth)        |          |      |        |        |
| Packer Type:                       | 5ize: .                           |                |               |                        | bet at:  |                  | Feet         |                |          |      |        |        |
| Total Depth:                       | Plug B                            | ack Depth:     |               | P                      | lug Back Meth  | od:              |              |                |          |      |        |        |
|                                    |                                   |                |               |                        |  |                  |              |                |          |      |        |        |
| Geological Date:                   | Name Formation Top Formation Base |                |               | Completion Information |  |                  |              |                |          |      |        |        |
| Geological Date:<br>Formation Name | Formatio                          | n lop Formatio |               |                        |  |                  |              |                |          |      |        |        |
| -                                  |                                   | •              | Feet          | Perfor                 | ation Interval   | to               | Feet or      | Open Hole Inte | erval    | t    | to     | _Feet  |

## 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 and the and and finded many and party the party | 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

05/15/2024

BRIAN J MCCOY Edison Operating Company LLC 8100 E. 22ND ST. N., BLDG 1900 WICHITA, KS 67226

Re: Temporary Abandonment API 15-075-10118-00-00 KINCHELOE 1-3 SW/4 Sec.03-23S-41W Hamilton County, Kansas

Dear BRIAN J MCCOY:

"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 04/01/2025.

\* 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 04/01/2025.

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

Very truly yours,

Michael Maier"