

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form must be Typed
Form must be signed

TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

OPERATOR: License#
Name:
Address 1:
Address 2:
City: State: Zip:
Contact Person:
Phone:
Contact Person Email:
Field Contact Person:
Field Contact Person Phone:

API No. 15-
Spot Description:
Sec. Twp. S. R.
feet from N / S Line of Section
feet from E / W Line of Section
GPS Location: Lat: , Long:
Datum: NAD27 NAD83 WGS84
County: Elevation: GL KB
Lease Name: Well #:
Well Type: Oil Gas OG WSW Other:
SWD Permit #: ENHR Permit #:
Gas Storage Permit #:
Spud Date: Date Shut-In:

Table with 7 columns: Conductor, Surface, Production, Intermediate, Liner, Tubing. Rows include Size, Setting Depth, Amount of Cement, Top of Cement, Bottom of Cement.

Casing Fluid Level from Surface: How Determined? Date:
Casing Squeeze(s): to w / sacks of cement, to w / sacks of cement. Date:
Do you have a valid Oil & Gas Lease? Yes No
Depth and Type: Junk in Hole at Tools in Hole at Casing Leaks: Yes No Depth of casing leak(s):
Type Completion: ALT. I ALT. II Depth of: DV Tool: w / sacks of cement Port Collar: w / sack of cement
Packer Type: Size: Inch Set at: Feet
Total Depth: Plug Back Depth: Plug Back Method:

Geological Date:

Table with 4 columns: Formation Name, Formation Top, Formation Base, Completion Information. Rows 1 and 2.

UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

Submitted Electronically

Do NOT Write in This 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:

Table with 3 columns: District Office #, Address, Phone. Includes map of Kansas with numbered districts 1-4.

ECHOMETER COMPANY PHONE-940-767-4334

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ECHON

05/08/2024 13:44:25

WELL *MA Yost*

CRASING PRESSURE.....

AP *42.8*

ΔT *144*

PRODUCTION RATE..... *10017 or 248*

slot losses

JOINTS TO LIQUID.....

DISTRANCE TO LIQUID..... *843' to Fluid*

PBHP

SBHP

PRDD RATE EFF, %

MAX PRODUCTION

Nelson A-4

Cased Hole

UPPER COLLARS R: 5.1

P-P 3.21 mV

LIQUID LEVEL R: 2.8

P-P 4.29 mV

05/22/2024

Marcia Blundon
M.A. Yost Operations, Inc
PO BOX 811
PO BOX 811
RUSSELL, KS 67665-0811

Re: Temporary Abandonment
API 15-145-21548-00-00
NELSON A 4
NE/4 Sec.23-20S-16W
Pawnee County, Kansas

Dear Marcia Blundon:

"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 05/22/2025.

- * 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 05/22/2025.

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

Very truly yours,

Michael Maier"