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 | Twp S. F | ₹ | E W | | |
| Address 2: | feet from N / S Line of Section feet from E / W Line of Section | | | | | | | | | |
| City: | | | | | | | | | | |
| Contact Person: | | | | GPS Location: Lat: | | | | | | |
| | | | | | | | | | Lease Name: Well #: | |
| | | | | Field Contact Person: | Well Type: (check one) Oil Gas OG WSW Other: | | | | | |
| Field Contact Person Phone: () | | | | | SWD Permit #: ENHR Permit #: | | | | | |
| | , (, , | | | _ | rage Permit #: | Date Shut-In: | | | | |
| | Conductor | Surface | Pro | oduction | Intermediate | Liner | Tubing | | | |
| Size | | | | | | | | | | |
| Setting Depth | | | | | | | | | | |
| Amount of Cement | | | | | | | | | | |
| Top of Cement | | | | | | | | | | |
| Bottom of Cement | | | | | | | | | | |
| Casing Fluid Level from Sur Casing Squeeze(s): | | | | | | | | | | |
| (top) Do you have a valid Oil & G | | | | (top) | (bottom) | | | | | |
| Depth and Type: | | | Ca | sing Leaks: | Yes No Depti | n of casing leak(s): | | | | |
| Type Completion: ALT. | | | | | | | | of cement | | |
| Packer Type: | | | | | | | | | | |
| | | | | | | | | | | |
| Total Depth: | Plug Ba | ck Depth: | | Plug Back Metho | od: | | | | | |
| Geological Date: | | | | | | | | | | |
| Formation Name | Formation | Top Formation Base | | | Completio | n Information | | | | |
| 1 | At: | to Feet | Perfo | ration Interval _ | toF | eet or Open Hole Interva | l to | Feet | | |
| 2 | At: | to Feet | Perfo | ration Interval _ | to F | eet or Open Hole Interva | l to | Feet | | |
| INDED DENALTY OF DED | IIIDV I LIEDEDV ATTE | CT TUAT TUE INFORMA | TION CO | NITAINED LIED | EIN IS TOLIE AND O | | JE MV KNOMI E | :DCE | | |
| | | Submitt | ed Ele | ctronically | / | | | | | |
| | | | | | | | | | | |
| Do NOT Write in This Space - KCC USE ONLY | | | esults: | | Date Plugged: | Date Repaired: Date | e Put Back in Serv | rice: | | |
| Review Completed by: | | | Comn | nents: | | | | | | |
| TA Approved: Yes | Denied Date: | | | | | | | | | |
| | | Ba-tt e et e | | | 0.0 | | | | | |

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

06/18/2024

DAVE CALLEWAERT Eagle Creek Corporation 423 E FLINT HILLS NATIONAL CT ANDOVER, KS 67002-8838

Re: Temporary Abandonment API 15-119-21175-00-00 ROEHR 1-17 SW/4 Sec.17-32S-30W Meade County, Kansas

Dear DAVE CALLEWAERT:

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

Needs a current fluid level attached to kolar form

Pursuant to K.A.R. 82-3-111, the well must be plugged, or returned to service, or obtain temporary abandonment status by 07/18/2024.

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, Michael Maier KCC DISTRICT 1