

TEMPORARY ABANDONMENT WELL APPLICATION

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. _____ E W
 _____ feet from N / S Line of Section
 _____ feet from E / W Line of Section
 GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)
 Datum: NAD27 NAD83 WGS84
 County: _____ Elevation: _____ GL KB
 Lease Name: _____ Well #: _____
 Well Type: (check one) Oil Gas OG WSW Other: _____
 SWD Permit #: _____ ENHR Permit #: _____
 Gas Storage Permit #: _____
 Spud Date: _____ Date Shut-In: _____

	Conductor	Surface	Production	Intermediate	Liner	Tubing
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: _____
(top) (bottom) (top) (bottom)
 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): _____
(depth) (depth)
 Type Completion: ALT. I ALT. II Depth of: DV Tool: _____ w / _____ sacks of cement Port Collar: _____ w / _____ sack of cement
(depth) (depth)
 Packer Type: _____ Size: _____ Inch Set at: _____ Feet
 Total Depth: _____ Plug Back Depth: _____ Plug Back Method: _____

Geological Data:

Formation Name	Formation Top	Formation Base	Completion Information
1. _____	At: _____	to _____ Feet	Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet
2. _____	At: _____	to _____ Feet	Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet

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: <input type="checkbox"/> Yes <input type="checkbox"/> Denied Date: _____					

Mail to the Appropriate KCC Conservation Office:

	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

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
CASING MECHANICAL INTEGRITY TEST**

Form U-7
August 2019

Disposal: Enhanced Recovery: KCC District No.: _____
 Operator License No.: 34303 Name: Jordan Oil Management Inc
 Address 1: 8463 South Ida Street
 Address 2: _____
 City: Haysville State: KS Zip: 67060 + _____
 Contact Person: Jason Bruns Phone: (____) _____

API No.: 15-191-20581-0000 Permit No.: N/A
NW 20 Sec. 8 Twp. 30 S. R. 2 East West
3630 Feet from North / South Line of Section
2310 Feet from East / West Line of Section
 Lease: Latta A Well No.: 9
 County: Sumner

Well Construction Details: New well Existing well with changes to construction Existing well with no changes to construction

Maximum Authorized Injection Pressure: _____ psi Maximum Injection Rate: _____ bbl/d

	Conductor	Surface	Intermediate	Production	Liner	Tubing
Size:	<u>N/A</u>	<u>8.625</u>	<u>N/A</u>	<u>4.5</u>	<u>N/A</u>	<u>N/A</u>
Set at:		<u>246</u>		<u>3294</u>		
Sacks of Cement:		<u>130</u>		<u>100</u>		
Cement Top:		<u>0</u>		<u>2922</u>		
Cement Bottom:		<u>246</u>		<u>3294</u>		

Packer Type: _____ Set at: _____
 DV Tool Port Collar Depth of: _____ feet with _____ sacks of cement TD (and plug back): 3295 BP 3050' feet depth

Zone of Injection Formation: KANSAS CITY Top Feet: 3091 Bottom Feet: 3292 Perf. or Open Hole: _____

Is there a Chemical Sealant or a Mechanical Casing patch in the annular space? Yes No

If Dual Completion - Injection is: Above Production Below Production

FIELD DATA

GPS Location: Datum: NAD27 NAD83 WGS84 Lat: 37.45590 Long: -97.55930 Date Acquired: 3/5/2024

Type MIT: _____ MIT Reason: 10 YEAR TA

Time in Minute(s):	<u>10</u>	<u>20</u>	<u>30</u>			
Pressures: Set up 1	<u>315</u>	<u>315</u>	<u>315</u>			
Set up 2						
Set up 3						

Tested: Casing or Casing - Tubing Annulus System Pressure during test: _____ Bbls. to load annulus: _____

Test Date: 3-5-2024 Using: COMPANY TOOLS Company's Equipment _____

The zone tested for this well is between 0 feet and 3050 feet.

The test results were verified by operator's representative:

Name: Jason Bruns Title: Admin Phone: (620)-440-2595

KCC Office Use Only The results were: <input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory Next MIT: _____	State Agent: <u>[Signature]</u> Title: <u>DISTRICT SUPERVISOR</u> Witness: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Remarks: <u>The Latta A 9 is an oil well being tested for TA purposes. This is a 10 YR TA well.</u>

Conservation Division
District Office No. 2
3450 N. Rock Road
Building 600, Suite 601
Wichita, KS 67226



Phone: 316-337-7400
<http://kcc.ks.gov/>

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

Laura Kelly, Governor

07/29/2024

Justin Bruns
Jordan Oil Management Inc.
PO Box 152
Haysville, KS 67060-0642

Re: Temporary Abandonment
API 15-191-20581-00-00
LATTA A LEASE 9
NE/4 Sec.08-30S-02W
Sumner County, Kansas

Dear Justin Bruns:

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 04/23/2025.

Your exception application expires on 04/23/2027.

- * 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 04/23/2025.

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

Very truly yours,

Jeff Klock, District Supervisor