Form CP-111 July 2017 Form must be Typed Form must be signed

TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

Phone 620.902.6450

Phone 785.261.6250

OPERATOR: License#				API No. 15-											
Name:				Spot Description:											
Address 1:				Sec Twp S. R EW											
Address 2:						feet from N	/ S Line of Section								
City:				feet from E / W Line of Section											
Contact Person:				GPS Location: Lat:											
Phone:()					Datum: NAD27 NAD83 WGS84 County: Elevation: GL KB										
Contact Person Email: Field Contact Person: Field Contact Person Phone: ()				Lease Name:											
												Spud Date:		Date Shut-In:	
									Conductor	Surface	Pr	oduction	Intermediate	Liner	Tubing
								Size							
Setting Depth															
Amount of Cement															
Top of Cement															
Bottom of Cement															
Cooing Fluid Lovel from Su	rfo.co	Цо	w Dotorminod)		r	Data								
Casing Fluid Level from Surface: How Determined? Date:															
(top)) (bottom)	38003	or cement, _	(top)	(bottom)	sacks of cernent. I	Date								
Do you have a valid Oil & G	Sas Lease? Yes	No													
Depth and Type:	in Hole at	Tools in Hole at _	Ca	asing Leaks:	Yes No Depth o	f casing leak(s):									
Type Completion: ALT															
Packer Type:						(dopul)									
Total Depth:	Plug Ba	ck Depth:		Plug Back Meth	od:										
Geological Date:															
Formation Name	Formation	Top Formation Bas	se		Completion Ir	nformation									
	•				pration Interval to Feet or Open Hole Interval to Feet										
2	At·						altoFeet								
	710		1000	ration into var		or open note into ve									
IINDED DENALTY OF DEE	IIIDV I LEDEDV ATTI	EST TUAT TUE INCO	DMATION CO	NITAINED HEE	EIN IS TOLIE AND COD	DECT TO THE DECT	OE MV KNOW! EDGE								
		Subr	nitted Ele	ctronicall	y										
Do NOT Write in This Date Tested: Results:					Date Plugged:	Date Repaired: Dat	e Put Back in Service:								
Space - KCC USE ONLY		_													
Review Completed by: Comments:															
TA Approved: Yes	Denied Date:														
		Mail to the	Appropriate	KCC Conserv	vation Office:										
Physic bads gaps and the color hads	KCC Dist	KCC District Office #1 - 210 E. Frontview, Sui					Phone 620.682.7933								
	===	KCC District Office #2 - 3450 N. Rock Road,													
	TOO DIST	1100 mz - 0400		, building ood, i	Jano Gor, Wildina, NO G		1 110110 010.001.1700								

KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720

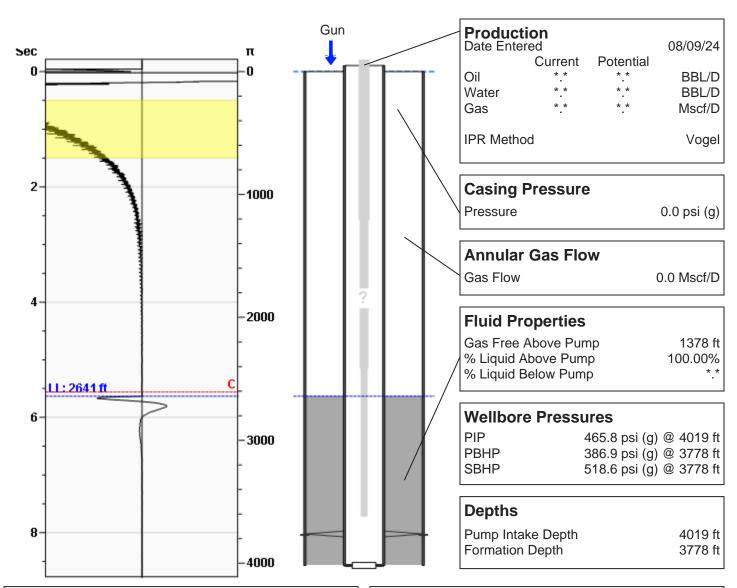
KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651

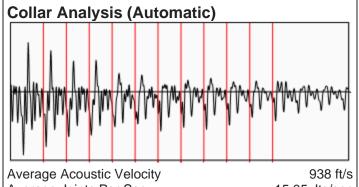


Gotl Trust Unit 4-14 08/09/2024 03:03:21PM

WG Unknown

Fluid Above Pump 1378 ft **Liquid Level** 2641 ft





Average Joints Per Sec. 15.05 Jts/sec Joints To Liquid 84.77 Jts

Casing Pressure Buildup

No Pressure Acquired

Casing Pressure 0.0 psi (g) 0.0 psi (g) Buildup **Buildup Time** 0 sec 1.0371 Air = 1Gas Gravity

Comments and Recommendations

8-9-24 - Acoustic Test

Echometer Company 5001 Ditto Lane Wichita Falls, TX 76302 (940) 767-4334 info@echometer.com

Conservation Division District Office No. 4 2301 E. 13th Street Hays, KS 67601-2651



Phone: 785-261-6250 http://kcc.ks.gov/

Laura Kelly, Governor

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

08/12/2024

Max Rose Murfin Drilling Co., Inc. 250 N WATER STE 300 WICHITA, KS 67202-1216

Re: Temporary Abandonment API 15-065-23330-00-00 Goltl Trust 4-14 SE/4 Sec.14-10S-24W Graham County, Kansas

Dear Max Rose:

"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 08/12/2025.

- * 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 08/12/2025.

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

Very truly yours,

RICHARD WILLIAMS"