Form must be Typed Form must be signed

TEMPORARY AB

OPERATOR: License# Name: Address 1: Address 2:				A DI NI- 45								
Address 1:				API No. 15								
·				Spot Description:								
Address 2:												
			feet from N / S Line of Section feet from E / W Line of Section									
City:	State:	Zip: + _		GPS Location: Lat:, Long:								
Contact Person:			(e.g. xx.xxxxx) (e.gxxx.xxxxxx) Datum: NAD27 NAD83 WGS84									
Phone:()		County: Elevation: GL KB										
Contact Person Email:		Lease Name: Well #: Well #: Well Type: (check one)										
Field Contact Person:												
Field Contact Person Phone: (
`			Gas Storage Permit #: Date Shut-In:									
				Spud Date.			Date Shut-in.					
	Conductor	Surface	Pr	oduction	Intermedia	te	Liner	Tubing				
Size												
Setting Depth												
Amount of Cement												
Top of Cement												
Bottom of Cement												
Casing Fluid Level from Surface	ce:	How	Determined?)			Date:					
Casing Squeeze(s):												
		_		(top)	(bottom)							
Do you have a valid Oil & Gas	Lease? Yes	No										
Depth and Type:	Hole at	Tools in Hole at	denth) Ca	asing Leaks:	Yes No I	Depth of casi	ng leak(s):					
Type Completion: ALT. I									f cement			
Packer Type:							(depth)					
Total Depth:	Plug Bad	k Depth:		Plug Back Metho	d:							
Geological Date:	Farmatian i	To Formation Book			0	lation laterna	-ti					
Formation Name		Top Formation Base	oot Dorfe	ration Interval		letion Inform		40	Foot			
1							Open Hole Interval					
2	At:	to F	еет Репо	oration interval —	10	— Feet or (Open Hole Interval ——	το	Feet			
LINDED DENALTY OF DED II	IDV I UEDEDV ATTE	ET TUAT THE INCOR	MATION CO	NTAINED LEDE	IN ICTOILE AN	ID COBBEC	TTO THE DEST OF M	/ INDIAN E	DOE			
		Subm	itted Ele	ectronically	•							
Do NOT Write in This	Date Tested:		Results:		Date Plugge	d: Date	Repaired: Date Put	Back in Serv	rice:			

Mail to the Appropriate KCC Conservation Office:

_ Comments: _

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	-	lever	-	Date	Innere	-	1-	-	tons		Marine	-	-

TA Approved: Yes Denied

Date: ___

Review Completed by: ___

	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. 3 137 E. 21st Street Chanute, KS 66720



Phone: 620-902-6450 http://kcc.ks.gov/

Laura Kelly, Governor

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

08/12/2024

Michael Laymon Laymon Oil II, LLC 1998 SQUIRREL RD NEOSHO FALLS, KS 66758-7124

Re: Temporary Abandonment API 15-207-27902-00-00 STOCKEBRAND 1-11 NW/4 Sec.01-24S-14E Woodson County, Kansas

Dear Michael Laymon:

"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,

Ryan Tromsness ECRS"