KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form must be signed

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

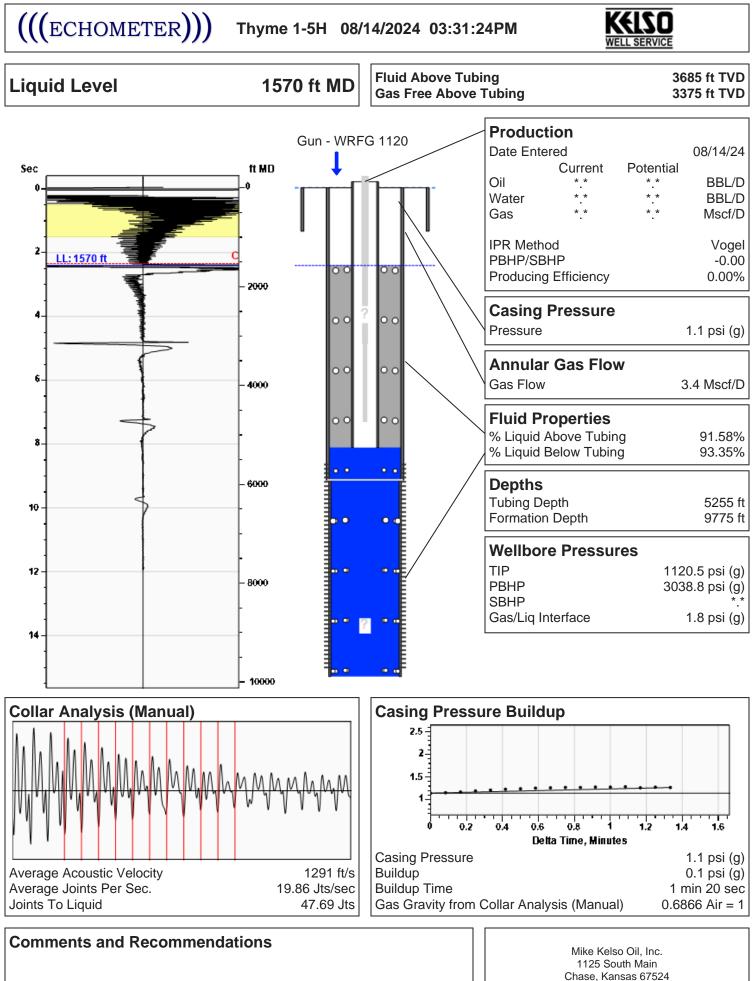
| OPERATOR: License# | | | | API No. 15- | API No. 15 | | | | | |
|--|--|---------------|----------------|------------------------|--|----------------------------|--------|---------|--|--|
| Name: | | | | Spot Descri | Spot Description: | | | | | |
| Address 1: | | | | . | Se | ec Twp S. R | | E 🗌 W | | |
| Address 2: City: Zip: + Contact Person: Phone: () | | | | - | feet from N / S Line of Section feet from E / W Line of Section | | | | | |
| | | | | | | | | | | |
| | | | | | GPS Location: Lat: | | | | | |
| | | | | | | | | | | |
| Contact Person Email: | | | | | | Well #: | | | | |
| Field Contact Person: | | | | Well Type: (d | check one) 🗌 | Oil Gas OG WSW Ot | ner: | | | |
| Field Contact Person Phon | | | | | SWD Permit #: ENHR Permit #: | | | | | |
| | // | | | | | | | | | |
| | | | | Spud Date: | | Date Shut-In: | | | | |
| | Conductor | Surface | | Production | Intermedi | ate Liner | Tubing | 1 | | |
| Size | | | | | | | | | | |
| Setting Depth | | | | | | | | | | |
| Amount of Cement | | | | | | | | | | |
| Top of Cement | | | | | | | | | | |
| Bottom of Cement | | | | | | | | | | |
| Casing Fluid Level from Su | rface: | | How Determine | d? | | Date | : | | | |
| Casing Squeeze(s): | to w | / sa | cks of cement, | to | (bottom) w / | sacks of cement. Date | : | | | |
| Do you have a valid Oil & G | Gas Lease? 🗌 Yes | No | | | | | | | | |
| Depth and Type: Junk | in Hole at | Tools in Hole | at | Casing Leaks: | Yes No | Depth of casing leak(s): | | | | |
| | | | | | | Port Collar: w / | | | | |
| Packer Type: | | | , | | | | | . comon | | |
| Раскег Туре: | Size: _ | | In | ch Set at: | | Feet | | | | |
| Total Depth: | Plug B | ack Depth: | | Plug Back Method | od: | | | | | |
| Geological Date: | | | | | | | | | | |
| Formation Name | nation Name Formation Top Formation Base | | | Completion Information | | | | | | |
| | . . | to | Feet Pe | rforation Interval | to | Feet or Open Hole Interval | to | Feet | | |
| 1 | At: | | | | | | | | | |

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 De | enied Date: | | | | |

Mail to the Appropriate KCC Conservation Office:

| $\begin{array}{ c c c c c c c c c c c c c c c c c c c$ | 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 |



1-800-684-2943

Conservation Division District Office No. 1 210 E. Frontview, Suite A Dodge City, KS 67801



Phone: 620-682-7933 http://kcc.ks.gov/

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

08/27/2024

Hunter Rains APEX Resources LLC 2911 TURTLE CREEK BLVD SUITE 300 DALLAS, TX 75219-6243

Re: Temporary Abandonment API 15-033-21672-01-00 THYME 3419 1-5H NE/4 Sec.05-34S-19W Comanche County, Kansas

Dear Hunter Rains:

"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 08/27/2025.

* 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 08/27/2025.

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

Very truly yours,

Michael Maier"