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

TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

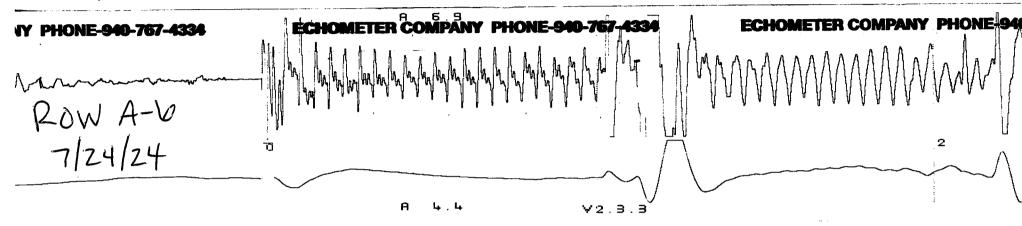
Phone 620.902.6450

Phone 785.261.6250

| OPERATOR: License# | | | | | API No. 15- | | | | | | | | | | | | | | | | |
|--|---|-------------------|---------------|---------|--|--------------------|--------------------|-------------|-------------------|-----------|---------------|-----------|-------|----|-----|------------|-------------|-----------|---------|--------|---|
| Name: | | | | | API No. 15- Spot Description: Sec. Twp S. R E W | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | feet from | | | |
| Address 2: | | | | | feet from DE / W Line of Section | | | | | | | | | | | | | | | | |
| Contract Person: | | | | | GPS Location | on: Lat: | , Lc | ong: | (e.gxxx.xxxxx) | | | | | | | | | | | | |
| Contact Person: Phone:() | | | | | Datum: NAD27 NAD83 WGS84 County: Elevation: GL KB Lease Name: Well #: Well #: Well Type: (check one) Oil Gas OG WSW Other: Other: SWD Permit #: ENHR Permit #: Gas Storage Permit #: Storage Permit #: | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | Spud Date: | | Date S | hut-In: | | |
| | | | | | | | | | | | | Conductor | Surfa | ce | Pro | oduction | Intermediat | e Li | ner | Tubing | 3 |
| | | | | | | | | | | | Size | | | | | | | | | | |
| | | | | | | | | | | | Setting Depth | | | | | | | | | | |
| Amount of Cement | | | | | | | | | | | | | | | | | | | | | |
| Top of Cement | | | | | | | | | | | | | | | | | | | | | |
| Bottom of Cement | | | | | | | | | | | | | | | | | | | | | |
| Casing Fluid Level from Surf | ace: | | _ How Dete | rmined? | | | | D |)ate: | | | | | | | | | | | | |
| Casing Squeeze(s): | to w | / | sacks of cem | ent, | to | W / | sacks of | cement. D |)ate: | | | | | | | | | | | | |
| Do you have a valid Oil & Ga | • • • | | | | (100) | (bottom) | | | | | | | | | | | | | | | |
| | | | | 0 | – |]v 🗀 v - = | | | | | | | | | | | | | | | |
| Depth and Type: | | | | | | | | | | | | | | | | | | | | | |
| Type Completion: ALT. | I ALT. II Depth | of: DV Too | l:(depth) | w/_ | sacks | of cement F | Port Collar: | w / . | sack of | of cement | | | | | | | | | | | |
| Packer Type: Size: Inch | | | | | Set at: | | Feet | | | | | | | | | | | | | | |
| Total Depth: | Plug Back Depth: | | | | Plug Back Method: | | | | | | | | | | | | | | | | |
| Geological Date: | | | | | | | | | | | | | | | | | | | | | |
| Formation Name | Formatio | n Top Formation | on Base | | | Comp | letion Information | | | | | | | | | | | | | | |
| I | · | | | Perfo | erforation Interval to feet or Open Hole Interval to | | | | | Feet | | | | | | | | | | | |
|) | | to | | | | | Feet or Open H | | | | | | | | | | | | | | |
| | | 10 | 1 000 | 1 0110 | ration interval | 10 | | ole interva | | | | | | | | | | | | | |
| INDED DENALTY OF DED | IIIDV I UEDEDV ATT | COT TU AT TUE | INFORMATI | ON CO | NITAINEN HED | EIN IC TOLIE AN | | JE DEST A | DE MV IZNOMI I | EDCE | | | | | | | | | | | |
| | | 5 | Submitte | d Ele | ctronically | / | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | |
| Do NOT Write in This | o NOT Write in This Date Tested: Results: | | | | | Date Plugge | d: Date Repaire | d. Date | e Put Back in Ser | vice. | | | | | | | | | | | |
| Space - KCC USE ONLY | | | | uno. | | | | | | | | | | | | | | | | | |
| Review Completed by: | | | | Comn | nents: | | | | | | | | | | | | | | | | |
| TA Approved: Yes | _ | : | | | | | | | | | | | | | | | | | | | |
| | | 88-** | | mulete! | V00 0 - · · | ation Office | | | | | | | | | | | | | | | |
| Mail to the Appropriate KCC Conservation Office: KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801 | | | | | | | | | Phone 620.68 | 2 7000 | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | |
| | KCC Dis | trict Office #2 - | · 3450 N. Roc | к Road, | Building 600, S | Suite 601, Wichita | a, KS 6/226 | | Phone 316.33 | 37.7400 | | | | | | | | | | | |

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

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



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

08/29/2024

Tracy Miller Cherokee Wells LLC P.O. BOX 296 FREDONIA, KS 66736-0296

Re: Temporary Abandonment API 15-205-27058-00-00 ROW A-6 NW/4 Sec.21-28S-15E Wilson County, Kansas

Dear Tracy Miller:

"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 08/29/2025.

- * 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 08/29/2025.

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

Very truly yours,

Levi Burnett ECRS"