KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form CP-111

July 2017

Form must be Typed

Form must be signed

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License# | | | | API NO. 15- | | | | | | | | | | | | | | |
|--|---|---|--|--|---|-------------------------------|-----------------------------|--------------------------------|--|-----------------------|--|--|--|--|--|--|--|------|
| Name: | | | | | ption: | | | | | | | | | | | | | |
| Address 1: | | | | | Sec | Twp | S. R | EW | | | | | | | | | | |
| Address 2: | | | | | | | = : | S Line of Section | | | | | | | | | | |
| City: State: Contact Person: Phone: | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | Contact Person Email: | | | | | | | | |
| | | | | | | | | | | Field Contact Person: | | | | | | | | ner: |
| Field Contact Person Phone | :() | | | | | | IR Permit #: | | | | | | | | | | | |
| | | | | _ | rage Permit #: | | -In: | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | Conductor | Surface | Pro | duction | Intermediate | Liner | • | Tubing | | | | | | | | | | |
| Size | | | | | | | | | | | | | | | | | | |
| Setting Depth | | | | | | | | | | | | | | | | | | |
| Amount of Cement | | | | | | | | | | | | | | | | | | |
| Top of Cement | | | | | | | | | | | | | | | | | | |
| Bottom of Cement | | | | | | | | | | | | | | | | | | |
| Casing Squeeze(s): | to w / | sacks of cer | | (top) to | (bottom) W / | sacks of cen | ment. Date: | | | | | | | | | | | |
| Casing Squeeze(s): (top) Do you have a valid Oil & Ga Depth and Type: Type Completion: Packer Type: Cotal Depth: Geological Date: Formation Name | to w / w / w / ws Lease? | sacks of cer No No Tools in Hole at | ment, h) Car w / _ Inch Perfor | sing Leaks: sacks Set at: Plug Back Meth ration Interval _ | Yes No Depth s of cement Port (Fee od: Completion to Fee | n of casing leak(s): Collar: | w / Interval | sack of cement to Feet to Feet | | | | | | | | | | |
| Casing Squeeze(s): (top) Do you have a valid Oil & Ga Depth and Type: Type Completion: Cacker Type: Cotal Depth: Cormation Name Cotal Date: Cormation Name | to w / w / w / ws Lease? | sacks of ceres sacks | Can w / _ Inch Perfor | sing Leaks: sacks Set at: Plug Back Meth ration Interval _ | Yes No Depth s of cement Port 0 Fee Completion to Fee to Fee | n of casing leak(s): Collar: | w / Interval | sack of cement to Feet to Feet | | | | | | | | | | |
| Casing Squeeze(s): (top) Do you have a valid Oil & Ga Depth and Type: Type Completion: Cacker Type: Cotal Depth: Cormation Name Cotal Date: Cormation Name | to w / w / w / ws Lease? | sacks of ceres sacks | Can w / _ Inch Perfor | sing Leaks: sacks sacks Set at: Plug Back Meth ration Interval ration Interval | Yes No Depth s of cement Port 0 Fee Completion to Fee to Fee | n of casing leak(s): Collar: | w / Interval Interval | sack of cement to Feet to Feet | | | | | | | | | | |
| Casing Squeeze(s): (top) Do you have a valid Oil & Ga Depth and Type: Junk in Type Completion: Cacker Type: Cotal Depth: Geological Date: Formation Name Cacker Type: Cacker Type: Cotal Depth: Cotal D | tow /w / | sacks of ceres sacks | Performents: | sing Leaks: sacks sacks Set at: Plug Back Meth ration Interval ration Interval | Yes No Depth s of cement Port of Port | n of casing leak(s): Collar: | w / Interval Interval | to Feet to Feet | | | | | | | | | | |
| Do NOT Write in This Space - KCC USE ONLY | tow /w / | sacks of ceres sacks | Performents: | sing Leaks: sacks Set at: sacks Plug Back Meth ration Interval ration Interval ctronically | Yes No Depth s of cement Port of Port | n of casing leak(s): Collar: | w / Interval Interval | to Feet to Feet | | | | | | | | | | |

| 100 | 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. 1 210 E. Frontview, Suite A Dodge City, KS 67801



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

Laura Kelly, Governor

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

09/18/2024

Tripp Markwell ELM III Operating Company LLC 1249 E. 33RD ST EDMOND, OK 73013-6307

Re: Temporary Abandonment API 15-081-21433-00-00 LIGHTCAP B 1 SE/4 Sec.32-28S-34W Haskell County, Kansas

Dear Tripp Markwell:

"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 09/18/2025.

- * 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 09/18/2025.

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

Very truly yours,

Michael Maier"