

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form must be Typed

Form must be signed

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License# _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

Contact Person Email: _____

Field Contact Person: _____

Field Contact Person Phone: (_____) _____

API No. 15- _____

Spot Description: _____

____ - ____ - ____ - ____ Sec. _____ Twp. _____ S. R. _____ ☐ E ☐ W_____ feet from ☐ N / ☐ S Line of Section_____ feet from ☐ E / ☐ W Line of Section

GPS Location: Lat: _____, Long: _____

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84County: _____ Elevation: _____ ☐ GL ☐ KB

Lease Name: _____ Well #: _____

Well Type: (check one) ☐ Oil ☐ Gas ☐ OG ☐ WSW ☐ Other: _____☐ SWD Permit #: _____ ☐ ENHR Permit #: _____☐ Gas Storage Permit #: _____

Spud Date: _____ Date Shut-In: _____

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size						
Setting Depth						
Amount of Cement						
Top of Cement						
Bottom of Cement						

Casing Fluid Level from Surface: _____ How Determined? _____ Date: _____

Casing Squeeze(s): _____ to _____ w / _____ sacks of cement, _____ to _____ w / _____ sacks of cement. Date: _____

Do you have a valid Oil & Gas Lease? ☐ Yes ☐ NoDepth and Type: ☐ Junk in Hole at _____ ☐ Tools in Hole at _____ Casing Leaks: ☐ Yes ☐ No Depth of casing leak(s): _____Type Completion: ☐ ALT. I ☐ ALT. II Depth of: ☐ DV Tool: _____ w / _____ sacks of cement ☐ Port Collar: _____ w / _____ sack of cement

Packer Type: _____ Size: _____ Inch Set at: _____ Feet

Total Depth: _____ Plug Back Depth: _____ Plug Back Method: _____

Geological Data:**Formation Name**

Formation Top Formation Base

Completion Information

1. _____ At: _____ to _____ Feet Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet

2. _____ At: _____ to _____ Feet Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet

UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

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 ☐ Denied Date: _____**Mail to the Appropriate KCC Conservation Office:**

	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

TWM - Chuck Caffee : mull 1-28 <Shot Trace> acq-[12/20/24 14:32:59] Acoustic Test

File Mode Option Tools Help

☐ Acquire Mode

☒ Recall Mode

F2

Data
Files

F3

Select
Test

F4 Analyze

Select Liquid Level

Depth Determination

Casing Pressure

☒ BHP

Collars

Production

Current

Potential

Oil

Water

Gas

BBL/D

BBL/D

Mscf/D

IPR Method

Vogel

PBHP/SBHP

Producing Efficiency

0.0

%

Fluid Densities

Oil

32

deg.API

Water

1.05

Sp.Gr.H2O

Gas Gravity

0.70

Air = 1

Acoustic Velocity

1350.15

ft/s

Casing Pressure

-14.7

psi (g)

Casing Pressure Buildup

0.1

psi

1.00

min

Gas/Liquid Interface Pres.

-14.7

psi (g)

Liquid Level Depth

MD

1701.87

ft

Pump Intake Depth

MD

4695.00

ft

TVD

4695.00

Formation Depth

MD

4448.00

ft

Pump Submergence

Total Gaseous Liquid Column HT (TVD)

2993

ft

Equivalent Gas Free Liquid HT (TVD)

2775

ft

Comment

Acoustic Test

Well State:

Producing

Annular

Gas Flow

1

Mscf/D

% Liquid

92

Pump Intake Pressure

962.7

psi (g)

PBHP

879.2

psi (g)

Reservoir Pressure (SBHP)

psi (g)

< Pg Up

Pg Dwn >

Weight List...



TWM Help

01/08/2025

Melissa Imler
Casillas Petroleum Corp
348 ROAD DD
SATANTA, KS 67870-8775

Re: Temporary Abandonment
API 15-081-20822-00-01
MULL 1 OWWO
NE/4 Sec.28-29S-33W
Haskell County, Kansas

Dear Melissa Imler:

"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 01/08/2026.

- * 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 01/08/2026.

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

Very truly yours,

Michael Maier"