

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# 32062

Name: ARDC INC.

Address 1: 108 W 34TH ST

Address 2: _____

City: HAYS State: KS Zip: 67601 + 1629

Contact Person: Greg Whitehair

Phone: (785) 432-0789

Contact Person Email: _____

Field Contact Person: _____

Field Contact Person Phone: (_____) _____

API No. 15- 15-009-23603-00-00

Spot Description: NE SE NE Sec. 27 Twp. 19 S. R. 13 ☐ E ☒ W

1650 feet from ☒ N / ☐ S Line of Section

330 feet from ☒ E / ☐ W Line of Section

GPS Location: Lat: _____, Long: _____

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: Barton Elevation: _____ ☐ GL ☐ KB

Lease Name: SLENTZ Well #: 4

Well Type: (check one) ☒ Oil ☐ Gas ☐ OG ☐ WSW ☐ Other: _____

☐ SWD Permit #: _____ ☐ ENHR Permit #: _____

☐ Gas Storage Permit #: _____

Spud Date: 07/10/1984 Date Shut-In: 06/23/2022

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	na	8.625	7	NA	NA	NA
Setting Depth		713	3510			
Amount of Cement		440	150			
Top of Cement		0	2500			
Bottom of Cement		713	3510			

Casing Fluid Level from Surface: 2850 How Determined? Fluid Level Gun Date: 12/12/2024

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

Do you have a valid Oil & Gas Lease? ☒ Yes ☐ No

Depth and Type: ☐ Junk in Hole at _____ (depth) ☐ Tools in Hole at _____ (depth) 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: 3510 Plug Back Depth: _____ Plug Back Method: _____

Geological Date:

Formation Name Formation Top Formation Base Completion Information

1. _____ At: _____ to _____ Feet Perforation Interval 3437 to 3445 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: <u>RICHARD WILLIAMS</u> Comments: <u>T/A #4-005,813</u>				
TA Approved: ☒ Yes ☐ Denied Date: <u>01/13/2025</u>					

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

ECHOMETER COMPANY 5001 DITTO LANE, WICHITA FALLS, TEXAS 76302

ECHOMETER COMPANY 5001 DITTO L

Conservation Division
District Office No. 4
2301 E. 13th Street
Hays, KS 67601-2651



Phone: 785-261-6250
<http://kcc.ks.gov/>

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

Laura Kelly, Governor

01/13/2025

Greg Whitehair
ARDC INC.
108 W 34TH ST
HAYS, KS 67601-1629

Re: Temporary Abandonment
API 15-009-23603-00-00
SLENTZ 4
NE/4 Sec.27-19S-13W
Barton County, Kansas

Dear Greg Whitehair:

"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 01/13/2026.

- * 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 01/13/2026.

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

Very truly yours,

RICHARD WILLIAMS"