

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# 35564

Name: Owens Oil Company, LLC

Address 1: 1274 202ND RD

Address 2: _____

City: YATES CENTER State: KS Zip: 66783 + 5411

Contact Person: Scott Owens

Phone: (620) 4967048

Contact Person Email: _____

Field Contact Person: _____

Field Contact Person Phone: (_____) _____

API No. 15- 15-001-31387-00-00

Spot Description: SW NE NE NE Sec. 23 Twp. 25 S. R. 17 ☒ E ☐ W

500 feet from ☒ N / ☐ S Line of Section

500 feet from ☒ E / ☐ W Line of Section

GPS Location: Lat: _____, Long: _____

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: Allen Elevation: _____ ☐ GL ☐ KB

Lease Name: LARUE Well #: 1-15

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

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

☐ Gas Storage Permit #: _____

Spud Date: 06/19/2015 Date Shut-In: 01/01/2020

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	na	7	2.875	na	na	na
Setting Depth		22	860			
Amount of Cement		8	115			
Top of Cement		0	0			
Bottom of Cement		22	860			

Casing Fluid Level from Surface: 200 How Determined? line Date: 04/08/2025

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: 863 Plug Back Depth: _____ Plug Back Method: _____

Geological Date:

Formation Name **Formation Top** **Formation Base** **Completion Information**

1. _____ At: _____ to _____ Feet Perforation Interval 807 to 817 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>Keith Carswell ECRS</u> Comments: <u>shut-in date changed based on previous CP-111</u>				
TA Approved: ☒ Yes ☐ Denied Date: <u>04/14/2025</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

04/14/2025

Scott Owens
Owens Oil Company, LLC
1274 202ND RD
YATES CENTER, KS 66783-5411

Re: Temporary Abandonment
API 15-001-31387-00-00
LARUE 1-15
NE/4 Sec.23-25S-17E
Allen County, Kansas

Dear Scott Owens:

"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 04/14/2026.

- * 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 04/14/2026.

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

Very truly yours,

Keith Carswell ECRS"