

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# 34350

Name: Altavista Energy, Inc.

Address 1: 802 E 7th St

Address 2: PO BOX 128

City: WELLSVILLE State: KS Zip: 66092 + 0128

Contact Person: Phil Frick

Phone: (785) 883-4057

Contact Person Email: _____

Field Contact Person: _____

Field Contact Person Phone: (_____) _____

API No. 15- 15-045-20295-00-00

Spot Description: NW NE NE NE Sec. 11 Twp. 15 S. R. 20 ☒ E ☐ W
5164 feet from ☐ N / ☒ S Line of Section
461 feet from ☒ E / ☐ W Line of Section

GPS Location: Lat: _____, Long: _____
 (e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: Douglas Elevation: _____ ☐ GL ☐ KB

Lease Name: EARLY Well #: 118 A

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

☐ SWD Permit #: _____ ☒ ENHR Permit #: E08295.49

☐ Gas Storage Permit #: _____

Spud Date: 11/11/1981 Date Shut-In: 02/01/2022

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	NA	6.25	2.875	NA	NA	NA
Setting Depth		111	899			
Amount of Cement		31	130			
Top of Cement		0	0			
Bottom of Cement		111	903			

Casing Fluid Level from Surface: 0 How Determined? Visual Date: 04/10/2025

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

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
 (depth) (depth)

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

Total Depth: 903 Plug Back Depth: _____ Plug Back Method: _____

Geological Date:

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

1. _____ At: _____ to _____ Feet Perforation Interval 847 to 867 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 Review Completed by: <u>Keith Carswell ECRS</u> TA Approved: ☒ Yes ☐ Denied Date: <u>04/17/2025</u>	Date Tested: _____	Results: _____	Date Plugged: _____	Date Repaired: _____	Date Put Back in Service: _____
	Comments: _____				

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

04/17/2025

Phil Frick
Altavista Energy, Inc.
802 E 7th St
PO BOX 128
WELLSVILLE, KS 66092-0128

Re: Temporary Abandonment
API 15-045-20295-00-00
EARLY 118 A
NE/4 Sec.11-15S-20E
Douglas County, Kansas

Dear Phil Frick:

"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 04/17/2026.

- * 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 04/17/2026.

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

Very truly yours,

Keith Carswell ECRS"