

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

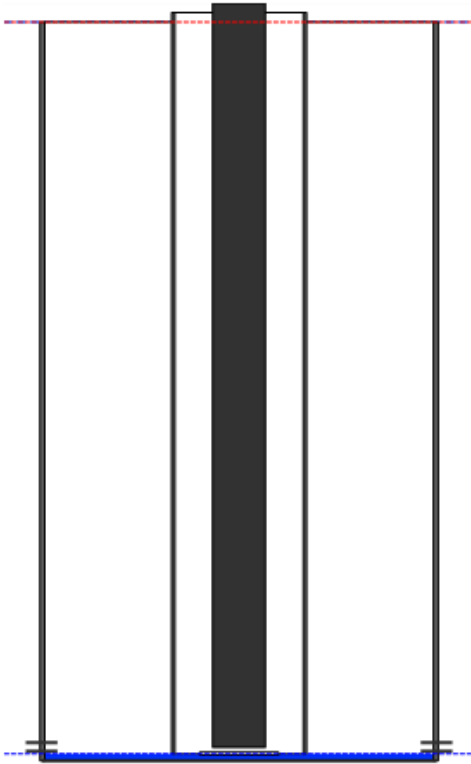
**Do NOT Write in This  
Space - KCC USE ONLY**

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:**

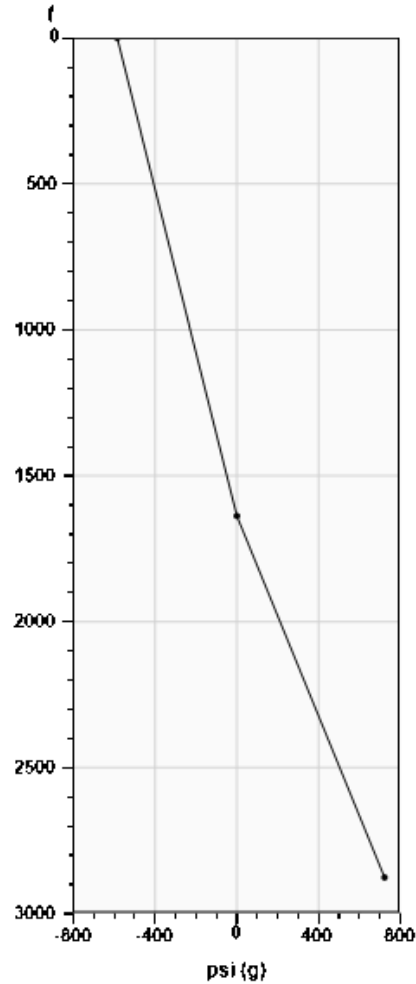
|                                                                                    |                                                                                        |                    |
|------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|--------------------|
|  | 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 |

**Producing Shot  
Manual Input****Manually Entered Production**

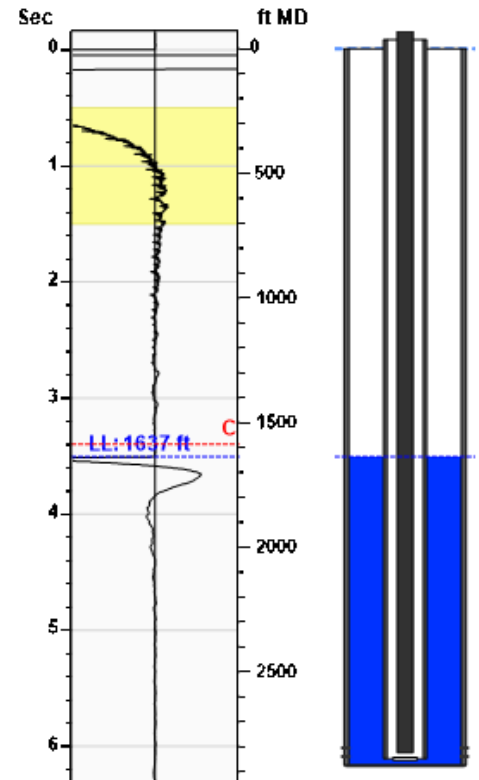
Liquid Level 2849 ft  
Percent Liquid 100.00%

**Static Bottomhole Pressure  
713.3 psi (g) @ 2860 ft TVD**

Static Liquid Level 1637 ft MD  
Oil Column Height -1637 ft MD  
Water Column Height 2860 ft MD

**Pressure Profile (TVD)****Well Test**

Oil 0 BBL/D  
Water 0 BBL/D

**Comments and  
Recommendations****Static Shot  
04/23/2025 10:01:49AM****Casing Pressure Buildup****No Pressure Acquired**

Casing Pressure \*\*. psi (g)  
Buildup \*\*. psi (g)  
Buildup Time \*\*. sec  
Gas Gravity 0.7000 Air = 1

**Casing Pressure**

Pressure \*\*. psi (g)

**Annular Gas Flow**

Gas Flow 0.0 Mscf/D

04/23/2025

Monte Boydston  
Trans Pacific Oil Corporation  
100 S MAIN ST STE 200  
WICHITA, KS 67202-3735

Re: Temporary Abandonment  
API 15-167-20459-00-00  
KRATKY J 5  
SE/4 Sec.24-14S-11W  
Russell County, Kansas

Dear Monte Boydston:

"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 12/01/2026.

- \* 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 12/01/2026.

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

Very truly yours,

RICHARD WILLIAMS"