

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION**

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: _____ (e.g. xx.xxxxxx) Long: _____ (e.g. -xxx.xxxxx)

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): (top) to (bottom) w / _____ sacks of cement, (top) to (bottom) 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 Date:

| 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: <input type="checkbox"/> Yes <input type="checkbox"/> 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 |

Dahlsten

8-26-25

42.5^{ft}



Conservation Division
District Office No. 2
3450 N. Rock Road
Building 600, Suite 601
Wichita, KS 67226



Phone: 316-337-7400
<http://kcc.ks.gov/>

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

Laura Kelly, Governor

09/17/2025

JAY R KREHBIEL
Krehbiel, Jay
504 N CARRIE ST
McPherson, KS 67460-3714

Re: Temporary Abandonment
API 15-113-21330-00-00
DAHLSTEN 1
SW/4 Sec.24-18S-04W
McPherson County, Kansas

Dear JAY R KREHBIEL:

"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 09/17/2026.

- * 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 09/17/2026.

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

Very truly yours,

Keith Karlin, ECRS"