

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

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: \_\_\_\_\_  
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)  
 Datum:  NAD27  NAD83  WGS84  
 County: \_\_\_\_\_ 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: \_\_\_\_\_  
(top) (bottom) (top) (bottom)  
 Do you have a valid Oil & Gas Lease?  Yes  No  
 Depth and Type:  Junk in Hole at \_\_\_\_\_  Tools in Hole at \_\_\_\_\_ Casing Leaks:  Yes  No Depth of casing leak(s): \_\_\_\_\_  
(depth) (depth)  
 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: \_\_\_\_\_ 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

<b>Do NOT Write in This Space - KCC USE ONLY</b>	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

FILE COPY

TIA # 4816

Form U-7 August 2019

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION CASING MECHANICAL INTEGRITY TEST

Disposal: [ ] Enhanced Recovery: [ ] KCC District No.: 04 Operator License No.: 8061 Name: Oil Producers Inc. of KS. Address 1: 1710 Waterway Pkwy. Address 2: City: Wichita State: KS Zip: 67206 + 6603 Contact Person: Chris Chrisler Phone: (785) 623-0183

API No.: 15-051-25651-00-00 Permit No.: TA purposes NW SE SE NE Sec. 8 Twp. 14 S. R. 17 [ ] East [x] West 3038 Feet from [ ] North / [x] South Line of Section 561 Feet from [x] East / [ ] West Line of Section Lease: Lang Well No.: 6 County: Ellis

Well Construction Details: [ ] New well [x] Existing well with changes to construction [ ] Existing well with no changes to construction

Maximum Authorized Injection Pressure: \_\_\_\_\_ psi Maximum Injection Rate: \_\_\_\_\_ bbl/d

Table with columns: Conductor, Surface, Intermediate, Production, Liner, Tubing. Rows: Size, Set at, Sacks of Cement, Cement Top, Cement Bottom.

Packer Type: NA Set at: CIBP-3511

[x] DV Tool [ ] Port Collar Depth of: 1227 feet with 210 sacks of cement TD (and plug back): TD-3860 PBTD-3646 feet depth

Zone of Injection Formation: Arb. Top Feet: 3566 Bottom Feet: 3604 Perf. or Open Hole: Open hole

Is there a Chemical Sealant or a Mechanical Casing patch in the annular space? [ ] Yes [x] No

If Dual Completion - Injection is: [ ] Above Production [ ] Below Production

FIELD DATA

GPS Location: Datum: [ ] NAD27 [ ] NAD83 [x] WGS84 Lat: 38.85035 Long: -099.22688 Date Acquired: \_\_\_\_\_

Type MIT: Tested CSG MIT Reason: For TA purposes

Table with columns for Time in Minute(s) and Pressures (Set up 1, 2, 3) across different well sections.

Tested: [x] Casing [ ] or Casing - Tubing Annulus System Pressure during test: 0 Bbls. to load annulus: 25

Test Date: 07/12/2023 Using: ATS Tank Service Company's Equipment

The zone tested for this well is between 0 feet and 3511 feet.

The test results were verified by operator's representative:

Name: Chris Chrisler Title: Pumper Phone: (785) 623-0183

KCC Office Use Only section containing State Agent signature, Title: ECRS, Witness: [x] Yes [ ] No, Remarks: MIT for TA purposes. NW SE SE NE 2995'FSL 422'FEL

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

11/05/2025

Scott Lawson  
Oil Producers, Inc. of Kansas  
1710 WATERFRONT PKWY  
WICHITA, KS 67206-6603

Re: Temporary Abandonment  
API 15-051-25651-00-00  
LANG 6  
NE/4 Sec.08-14S-17W  
Ellis County, Kansas

Dear Scott Lawson:

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 08/02/2026.

Your exception application expires on 08/02/2026.

- \* 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 08/02/2026.

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

Very truly yours,

SHANE JONES