

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# 4339

Name: Jackson, Dale E & Sue Ellen dba Dale E. Jackson Production Co.

Address 1: 2449 US HIGHWAY 7

Address 2: _____

City: MAPLETON State: KS Zip: 66754 + 9443

Contact Person: Sue Jackson

Phone: (620) 363-2696

Contact Person Email: _____

Field Contact Person: _____

Field Contact Person Phone: (_____) _____

API No. 15- 15-107-25348-00-00

Spot Description: SW SE NE Sec. 34 Twp. 21 S. R. 23 ☒ E ☐ W
2947 feet from ☐ N / ☒ S Line of Section
950 feet from ☒ E / ☐ W Line of Section

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

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: Linn Elevation: _____ ☐ GL ☐ KB

Lease Name: DUNAVAN Well #: IB4

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

☐ SWD Permit #: _____ ☒ ENHR Permit #: E09040

☐ Gas Storage Permit #: _____

Spud Date: 06/08/2021 Date Shut-In: 10/30/2023

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	N/A	6	2.875	N/A	N/A	N/A
Setting Depth		20	455			
Amount of Cement		5	55			
Top of Cement		0	0			
Bottom of Cement		20	455			

Casing Fluid Level from Surface: 100 How Determined? SLM Date: 01/04/2026

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: 469 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 <u>453</u> to <u>469</u> 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>Ryan Hermreck ECRS</u> Comments: _____				
TA Approved: ☒ Yes ☐ Denied Date: <u>02/17/2026</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

02/17/2026

Sue Jackson
Jackson, Dale E & Sue Ellen dba Dale E.
Jackson Production Co.
2449 US HIGHWAY 7
MAPLETON, KS 66754-9443

Re: Temporary Abandonment
API 15-107-25348-00-00
DUNAVAN IB4
NE/4 Sec.34-21S-23E
Linn County, Kansas

Dear Sue Jackson:

"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 02/17/2027.

- * 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 02/17/2027.

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

Very truly yours,

Ryan Hermreck ECRS"