

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# 5116

Name: Wellwin Drilling Corporation

Address 1: 201 W HARVEY AVE

Address 2: PO BOX 529

City: WELLINGTON State: KS Zip: 67152 + 0529

Contact Person: J. C. Long

Phone: (620) 326-7471

Contact Person Email: jclong@bankofcommerce.ws

Field Contact Person: _____

Field Contact Person Phone: (_____) _____

API No. 15- 15-007-22034-00-00

Spot Description: NW SE SW Sec. 4 Twp. 32 S. R. 12 ☐ E ☒ W

990 feet from ☐ N / ☒ S Line of Section

3630 feet from ☒ E / ☐ W Line of Section

GPS Location: Lat: _____, Long: _____

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: Barber Elevation: 1486 ☐ GL ☒ KB

Lease Name: MCDANIELS Well #: 4-2

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

☐ SWD Permit #: _____ ☐ ENHR Permit #: _____

☐ Gas Storage Permit #: _____

Spud Date: 05/08/1985 Date Shut-In: 2/5/2019

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	0	8.625	5.5	0	0	2.875
Setting Depth	0	434	3439	0	0	3407
Amount of Cement	0	275	100	0	0	0
Top of Cement	0	0	0	0	0	0
Bottom of Cement	0	0	0	0	0	0

Casing Fluid Level from Surface: 1433 How Determined? ECHOMETER Date: 02/03/2026

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

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

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

Total Depth: 3440 Plug Back Depth: _____ Plug Back Method: _____

Geological Date:

Formation Name Elgin Formation Top 3384 Formation Base 3390 Completion Information 3384 3390

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: <u>Michael Maier</u> Comments: _____				
TA Approved: ☒ Yes ☐ Denied Date: <u>02/26/2026</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

Conservation Division
District Office No. 1
210 E. Frontview, Suite A
Dodge City, KS 67801



Phone: 620-682-7933
<http://kcc.ks.gov/>

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

Laura Kelly, Governor

02/26/2026

J. C. Long
Wellwin Drilling Corporation
201 W HARVEY AVE
PO BOX 529
WELLINGTON, KS 67152-0529

Re: Temporary Abandonment
API 15-007-22034-00-00
MCDANIELS 4-2
SW/4 Sec.04-32S-12W
Barber County, Kansas

Dear J. C. Long:

"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 02/26/2027.

- * 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 02/26/2027.

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

Very truly yours,

Michael Maier"