

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# 3519

Name: Sieg Energy, Inc.

Address 1: 726 S CEDAR ST

Address 2: _____

City: OTTAWA State: KS Zip: 66067 + 2908

Contact Person: KENT SIEG

Phone: (785) 242-2761

Contact Person Email: _____

Field Contact Person: _____

Field Contact Person Phone: (_____) _____

API No. 15- 15-059-21269-00-00

Spot Description: SW SW NE Sec. 22 Twp. 17 S. R. 21 ☒ E ☐ W

2780 feet from ☐ N / ☒ S Line of Section

2200 feet from ☒ E / ☐ W Line of Section

GPS Location: Lat: _____, Long: _____

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: Franklin Elevation: _____ ☐ GL ☐ KB

Lease Name: JUDSON B Well #: W-10

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

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

☐ Gas Storage Permit #: _____

Spud Date: _____ Date Shut-In: 07/06/2016

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	n/a	6.25	2.38	n/a	n/a	N/A
Setting Depth		75	340			
Amount of Cement		14	48			
Top of Cement		0	0			
Bottom of Cement		75	340			

Casing Fluid Level from Surface: 202 How Determined? wireline Date: 02/12/2026

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: 350 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>340</u> to <u>350</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>Jason Miller ECRS</u> Comments: <u>10-year shut-in expiration is 7/6/2026</u>				
TA Approved: ☒ Yes ☐ Denied Date: <u>03/04/2026</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

03/04/2026

KENT SIEG
Sieg Energy, Inc.
726 S CEDAR ST
OTTAWA, KS 66067-2908

Re: Temporary Abandonment
API 15-059-21269-00-00
JUDSON B W-10
NE/4 Sec.22-17S-21E
Franklin County, Kansas

Dear KENT SIEG:

"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 07/06/2026.

- * 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 07/06/2026.

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

Very truly yours,

Jason Miller ECRS"