

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# 33539

Name: Cherokee Wells LLC

Address 1: P.O. BOX 296

Address 2: _____

City: FREDONIA State: KS Zip: 66736 + 0296

Contact Person: Tracy Miller

Phone: (620) 378-3650

Contact Person Email: _____

Field Contact Person: _____

Field Contact Person Phone: (_____) _____

API No. 15- 15-205-27523-00-00

Spot Description: _____

1980 - NW SE Sec. 19 Twp. 27 S. R. 14 ☒ E ☐ W
feet from ☐ N / ☒ S Line of Section
1980 feet from ☒ E / ☐ W Line of Section

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

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: Wilson Elevation: _____ ☐ GL ☐ KB

Lease Name: NEUENSCHWANDER Well #: A-3

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

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

☐ Gas Storage Permit #: _____

Spud Date: 05/12/2008 Date Shut-In: 02/01/2017

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	N/A	8.625	4.5	N/A	N/A	N/A
Setting Depth		40	1395			
Amount of Cement		30	150			
Top of Cement		0	0			
Bottom of Cement		40	1395			

Casing Fluid Level from Surface: 165 How Determined? Echometer Date: 2/19/2026

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: 1405 Plug Back Depth: _____ Plug Back Method: _____

Geological Date:

Formation Name Formation Top Formation Base Completion Information

1. _____ At: _____ to _____ Feet Perforation Interval 724 to 1032 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>Adam Millar ECRS</u> Comments: <u>High Fluid level, CIT Required</u>				
TA Approved: ☐ Yes ☒ Denied	Date: <u>03/05/2026</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

Neuenschwander A-3

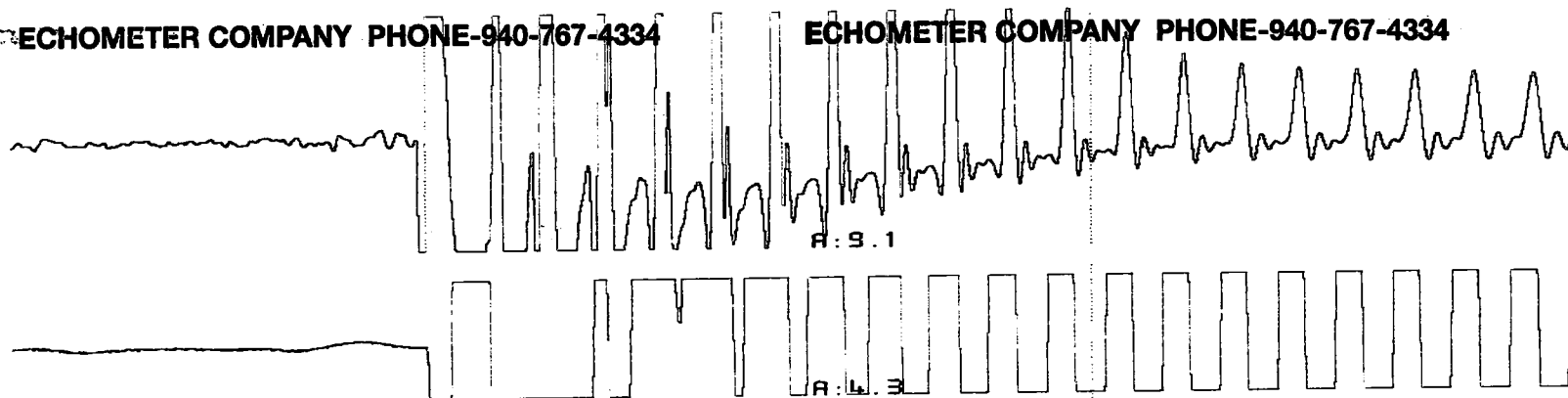
2/19/26

NE-940-767-4334

ECHOMETER COMPANY PHONE-940-767-4334

ECHOMETER COMPANY PHONE-940-767-4334

E



03/05/2026

Tracy Miller
Cherokee Wells LLC
P.O. BOX 296
FREDONIA, KS 66736-0296

Re: Temporary Abandonment
API 15-205-27523-00-00
NEUENSCHWANDER A-3
SE/4 Sec.19-27S-14E
Wilson County, Kansas

Dear Tracy Miller:

Your application for Temporary Abandonment (TA) for the above-listed well is denied for the following reasons(s):

High Fluid Level

Pursuant to K.A.R. 82-3-111, the well must be plugged, or returned to service, or obtain temporary abandonment status by 04/04/2026.

This deadline does NOT override any compliance deadline given to you in any Commission Order.

You may contact me if you have any questions.

Sincerely,
Adam Millar ECRS
KCC DISTRICT 3