

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form must be Typed
Form must be signed

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.
GPS Location: Lat: Long:
Datum: NAD27 NAD83 WGS84
County: Elevation:
Lease Name: Well #:
Well Type: Oil Gas OG WSW Other:
SWD Permit #: ENHR Permit #:
Gas Storage Permit #:
Spud Date: Date Shut-In:

Table with 7 columns: Conductor, Surface, Production, Intermediate, Liner, Tubing. Rows include 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:
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):
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: Plug Back Depth: Plug Back Method:

Geological Data:

Table with 4 columns: Formation Name, Formation Top, Formation Base, Completion Information. Rows 1 and 2.

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: Comments:
TA Approved: Yes Denied Date:

Mail to the Appropriate KCC Conservation Office:

Table with 3 columns: District Office, Address, Phone. Rows for District Office #1, #2, #3, #4.



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

Form U-7
August 2019

Disposal: Enhanced Recovery: KCC District No.: 2 API No.: 15-035-24588-00-00 Permit No.: _____
 Operator License No.: 39470 Name: VICTORY MINERALS LLC _____ NE Sec. 30 Twp 23 S. R. 8 East West
 Address 1: P.O. Box 414830 784 Feet from North / South Line of Section
 Address 2: _____ 6930 Feet from East / West Line of Section
 City: KANSAS CITY State: MO Zip: 64141 + 4830 Lease: SNYDER Well No.: 4
 Contact Person: CARLTON BOWEN Phone: (816) 223-3712 County: COWLEY

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

Maximum Authorized Injection Pressure: _____ psi Maximum Injection Rate: _____ bbl/d

	Conductor	Surface	Intermediate	Production	Liner		Tubing
Size:	<u>NA</u>	<u>8.625</u>	<u>NA</u>	<u>4.5</u>	<u>NA</u>	Size:	<u>NA</u>
Set at:		<u>227</u>		<u>2918</u>		Set at:	
Sacks of Cement:		<u>130</u>		<u>150</u>		Type:	
Cement Top:		<u>0</u>		<u>1800</u>			
Cement Bottom:		<u>225</u>		<u>2927</u>			

Packer Type: _____ Set at: _____

DV Tool Port Collar Depth of: _____ feet with _____ sacks of cement TD (and plug back): _____ feet depth

Zone of Injection Formation: _____ Top Feet: _____ Bottom Feet: _____ Perf. or Open Hole: _____

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

If Dual Completion - Injection is: Above Production Below Production

FIELD DATA

GPS Location: Datum: NAD27 NAD83 WGS84 Lat: 37.15629 Long: 96.58517 Date Acquired: 10-16-2025

Type MIT: _____ MIT Reason: TA

Time in Minute(s):	<u>10</u>	<u>20</u>	<u>30</u>			
Pressures: Set up 1	<u>400</u>	<u>400</u>	<u>400</u>			
Set up 2						
Set up 3						

Tested: Casing or Casing - Tubing Annulus System Pressure during test: _____ Bbls. to load annulus: 0

Test Date: 10-16-2025 Using: JIM DUNN CAN Company's Equipment

The zone tested for this well is between _____ feet and _____ feet.

The test results were verified by operator's representative:

Name: X Jim Dunn Title: JIM DUNN OIL Phone: (620) 330-2474

KCC Office Use Only

The results were:

- Satisfactory
 Not Satisfactory

Next MIT: _____

State Agent: NEAL BUYP Title: ECRS Witness: Yes No

Remarks: _____

SET CIBP @ 2100' - 50' ABOVE PERFS
CASING FULL, PRESSURE WITH FLUID

Conservation Division
District Office No. 2
3450 N. Rock Road
Building 600, Suite 601
Wichita, KS 67226



Phone: 316-337-7400
<http://kcc.ks.gov/>

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

Laura Kelly, Governor

04/06/2026

Carmon Bonanno
Victory Minerals LLC
PO Box 414830
KANSAS CITY, MO 64141-4830

Re: Temporary Abandonment
API 15-035-24588-00-00
SNYDER 4
NE/4 Sec.30-33S-08E
Cowley County, Kansas

Dear Carmon Bonanno:

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 10/24/2026.

Your exception application expires on 10/24/2028.

- * 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 10/24/2026.

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

Very truly yours,

Jeff Klock, District Supervisor