KOLAR Document ID: 1957280

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CP-111
July 2017
Form must be Typed
Form must be signed
All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License# 6470
Name: Schankie Well Service, Inc.
Address 1: PO BOX 397
Address 2:
City: MADISON State: KS Zip: 66860 + 0397
Contact Person: CLIFF SCHANKIE
Phone: (620) 437-2595
Contact Person Email:
Field Contact Person:
Field Contact Person Phone: ( )

API No. 15- 15-073-23887-00-00
Spot Description:
_ - SW SE NW Sec. 22 Twp. 23 S. R. 10 ☑ E ☐ W
2834 feet from ☐ N / ☑ S Line of Section
3622 feet from ☑ E / ☐ W Line of Section
GPS Location: Lat: (e.g. xx.xxxxx) , Long: (e.g. -xxx.xxxxx)
Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84
County: Greenwood Elevation: ☐ GL ☐ KB
Lease Name: EDWARDS Well #: 15
Well Type: *(check one)* ☑ Oil ☐ Gas ☐ OG ☐ WSW ☐ Other:
☐ SWD Permit #: ☐ ENHR Permit #:
☐ Gas Storage Permit #:
Spud Date: 03/06/2000 Date Shut-In: 6/7/2021

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	NA	8.625	5.5	NA	NA	NA
Setting Depth		200	2262			
Amount of Cement		115	250			
Top of Cement		0	900			
Bottom of Cement		200	2262			

Casing Fluid Level from Surface: 750 How Determined? PLUMB BOB Date: 06/06/2026
Casing Squeeze(s): ____ (top) to ____ (bottom) w / ____ sacks of cement, ____ (top) to ____ (bottom) 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: ____ (depth) w / ____ sacks of cement ☐ Port Collar: ____ (depth) w / ____ sack of cement
Packer Type: Size: Inch Set at: Feet
Total Depth: 2270 Plug Back Depth: Plug Back Method:

Geological Date:

Formation Name	Formation Top	Formation Base	Completion Information
1.	At:	to Feet	Perforation Interval 2221 to 2254 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: Thad Triboulet ECRS Comments:
TA Approved: ☑ Yes ☐ Denied Date: 06/09/2026

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. 3
137 E. 21st Street
Chanute, KS 66720

Kansas
Corporation Commission

Phone: 620-902-6450
http://kcc.ks.gov/

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

Laura Kelly, Governor

06/09/2026

CLIFF SCHANKIE
Schankie Well Service, Inc.
PO BOX 397
MADISON, KS 66860-0397

Re: Temporary Abandonment
API 15-073-23887-00-00
EDWARDS 15
NW/4 Sec.22-23S-10E
Greenwood County, Kansas

Dear CLIFF SCHANKIE:

"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 06/09/2027.

* 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 06/09/2027.

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

Very truly yours,

Thad Triboulet ECRS"