

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# 34350

Name: Altavista Energy, Inc.

Address 1: 4595 K-33 HIGHWAY

Address 2: PO BOX 128

City: WELLSVILLE State: KS Zip: 66092 + 0128

Contact Person: Phil Frick

Phone: ( 785 ) 883-4057

Contact Person Email: \_\_\_\_\_

Field Contact Person: \_\_\_\_\_

Field Contact Person Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

API No. 15- 15-121-31386-00-00

Spot Description: SE SE SW NW Sec. 16 Twp. 18 S. R. 24 ☒ E ☐ W

2720 feet from ☐ N / ☒ S Line of Section

4220 feet from ☒ E / ☐ W Line of Section

GPS Location: Lat: \_\_\_\_\_, Long: \_\_\_\_\_

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: Miami Elevation: \_\_\_\_\_ ☐ GL ☐ KB

Lease Name: KNOCHE Well #: A-23

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

☐ SWD Permit #: \_\_\_\_\_ ☐ ENHR Permit #: \_\_\_\_\_

☐ Gas Storage Permit #: \_\_\_\_\_

Spud Date: 09/19/2017 Date Shut-In: 09/21/2017

|                  | Conductor | Surface | Production | Intermediate | Liner | Tubing |
|------------------|-----------|---------|------------|--------------|-------|--------|
| Size             | NA        | 7       | 2.875      | NA           | NA    | NA     |
| Setting Depth    |           | 20      | 520        |              |       |        |
| Amount of Cement |           | 3       | 65         |              |       |        |
| Top of Cement    |           | 0       | 0          |              |       |        |
| Bottom of Cement |           | 20      | 520        |              |       |        |

Casing Fluid Level from Surface: 0 How Determined? Well not perforated Date: 05/27/2026

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: 540 Plug Back Depth: 488 Plug Back Method: Baffle

## Geological Date:

Formation Name Formation Top Formation Base Completion Information

1. \_\_\_\_\_ At: \_\_\_\_\_ to \_\_\_\_\_ Feet Perforation Interval 0 to 0 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>Jason Miller ECRS</u> Comments: _____                                                |              |          |               |                |                           |
| TA Approved: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Denied Date: <u>06/26/2026</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 |

06/26/2026

Phil Frick  
Altavista Energy, Inc.  
4595 K-33 HIGHWAY  
PO BOX 128  
WELLSVILLE, KS 66092-0128

Re: Temporary Abandonment  
API 15-121-31386-00-00  
KNOCHE A-23  
NW/4 Sec.16-18S-24E  
Miami County, Kansas

Dear Phil Frick:

"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 06/26/2027.

- \* 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 06/26/2027.

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

Very truly yours,

Jason Miller ECRS"