

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# 5697

Name: Jackson Brothers, L.L.C.

Address 1: 116 E 3RD ST

Address 2: _____

City: EUREKA State: KS Zip: 67045 + 1747

Contact Person: Roscoe G. Jackson II

Phone: (620) 583-5122

Contact Person Email: jblcandjv@att.net

Field Contact Person: Roscoe G. Jackson II

Field Contact Person Phone: (620) 583-5122

API No. 15- 15-073-20680-00-00

Spot Description: SE SE NW Sec. 14 Twp. 25 S. R. 8 ☒ E ☐ W

2970 feet from ☐ N / ☒ S Line of Section

2310 feet from ☐ E / ☒ W Line of Section

GPS Location: Lat: _____, Long: _____

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: Greenwood Elevation: 1337 ☐ GL ☒ KB

Lease Name: TEICHGRAEBER Well #: 10

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

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

☐ Gas Storage Permit #: _____

Spud Date: 08/16/1971 Date Shut-In: 06/03/2018

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	0	8.625	4.500	0	0	0
Setting Depth	0	50	2456	0	0	0
Amount of Cement	0	16	60	0	0	0
Top of Cement	0	0	2035	0	0	0
Bottom of Cement	0	50	2456	0	0	0

Casing Fluid Level from Surface: 920 How Determined? Steel Line Measure Date: 08/06/2026

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: 2460 Plug Back Depth: 2446 Plug Back Method: Cement

Geological Date:

Formation Name Formation Top Formation Base Completion Information

1. Bartlesville Sand At: 2386 to 2392 Feet Perforation Interval 2386 to 2391 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>Thad Triboulet ECRS</u> Comments: _____				
TA Approved: ☒ Yes ☐ Denied Date: <u>08/17/2026</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

08/17/2026

Roscoe G. Jackson II
Jackson Brothers, L.L.C.
116 E 3RD ST
EUREKA, KS 67045-1747

Re: Temporary Abandonment
API 15-073-20680-00-00
TEICHGRAEBER 10
NW/4 Sec.14-25S-08E
Greenwood County, Kansas

Dear Roscoe G. Jackson II:

"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 08/17/2027.

- * 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 08/17/2027.

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

Very truly yours,

Thad Triboulet ECRS"