

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# 34434

Name: Edison Operating Company LLC

Address 1: 9342 E CENTRAL AVE STE A

Address 2: _____

City: WICHITA State: KS Zip: 67206 + 2573

Contact Person: BRIAN J MCCOY

Phone: (316) 201-1744

Contact Person Email: _____

Field Contact Person: _____

Field Contact Person Phone: (_____) _____

API No. 15- 15-009-06999-00-01

Spot Description: NW NW NE Sec. 21 Twp. 19 S. R. 14 ☐ E ☒ W
330 feet from ☒ N / ☐ S Line of Section
2310 feet from ☒ E / ☐ W Line of Section

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

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: Barton Elevation: _____ ☐ GL ☐ KB

Lease Name: CALLAHAN Well #: 2-21

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

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

☐ Gas Storage Permit #: _____

Spud Date: 08/14/2003 Date Shut-In: 01/01/2025

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	NA	8.625	5.5	NA	NA	2.375
Setting Depth		816	1722			1780
Amount of Cement		600	250			0
Top of Cement		0	0			0
Bottom of Cement		816	1793			0

Casing Fluid Level from Surface: 1781 How Determined? ECHOMETER Date: 09/22/2026

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: 1793 Plug Back Depth: _____ Plug Back Method: _____

Geological Date:

Formation Name	Formation Top	Formation Base	Completion Information
1. _____	At: _____ to _____ Feet	Perforation Interval <u>1722</u> to <u>1780</u> 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>SHANE JONES</u> Comments: <u>T/A# 4-007,029</u>				
TA Approved: ☐ Yes ☒ Denied	Date: <u>09/29/2026</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

Conservation Division
District Office No. 4
2301 E. 13th Street
Hays, KS 67601-2651



Phone: 785-261-6250
<http://kcc.ks.gov/>

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

Laura Kelly, Governor

09/29/2026

BRIAN J MCCOY
Edison Operating Company LLC
9342 E CENTRAL AVE STE A
WICHITA, KS 67206-2573

Re: Temporary Abandonment
API 15-009-06999-00-01
CALLAHAN 2-21
NE/4 Sec.21-19S-14W
Barton County, Kansas

Dear BRIAN J MCCOY:

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

did not attach a copy of current fluid shot to CP-111

Pursuant to K.A.R. 82-3-111, the well must be plugged, or returned to service, or obtain temporary abandonment status by 10/29/2026.

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,
SHANE JONES
KCC DISTRICT 4