

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# 31938
Name: Indian Oil Co., Inc.
Address 1: 308 S. Main St.
Address 2: PO BOX 209
City: MEDICINE LODGE State: KS Zip: 67104 + 0209
Contact Person: Anthony Farrar
Phone: (620) 886-3763
Contact Person Email: _____
Field Contact Person: _____
Field Contact Person Phone: (_____) _____

API No. 15- 15-151-21986-00-00
Spot Description: _____
- NW NE Sec. 32 Twp. 29 S. R. 13 ☐ E ☒ W
4479 feet from ☐ N / ☒ S Line of Section
1859 feet from ☒ E / ☐ W Line of Section
GPS Location: Lat: _____, Long: _____
Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84
County: Pratt Elevation: _____ ☐ GL ☐ KB
Lease Name: CURRY Well #: 3-32
Well Type: (check one) ☐ Oil ☐ Gas ☒ OG ☐ WSW ☐ Other: _____
☐ SWD Permit #: _____ ☐ ENHR Permit #: _____
☐ Gas Storage Permit #: _____
Spud Date: 03/28/1990 Date Shut-In: 05/22/2024

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	na	13.375	4.5	na	na	na
Setting Depth		279	4828			
Amount of Cement		260	100			
Top of Cement		0	0			
Bottom of Cement		279	4825			

Casing Fluid Level from Surface: 3917 How Determined? Fluid Level Shot Date: 09/17/2026

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: 4829 Plug Back Depth: _____ Plug Back Method: _____

Geological Date:

Formation Name	Formation Top	Formation Base	Completion Information
1. _____	At: _____ to _____ Feet	Perforation Interval <u>4506</u> to <u>4525</u> Feet or Open Hole Interval _____ to _____ Feet	
2. _____	At: _____ to _____ Feet	Perforation Interval <u>4614</u> to <u>4647</u> Feet or Open Hole Interval _____ to _____ Feet	

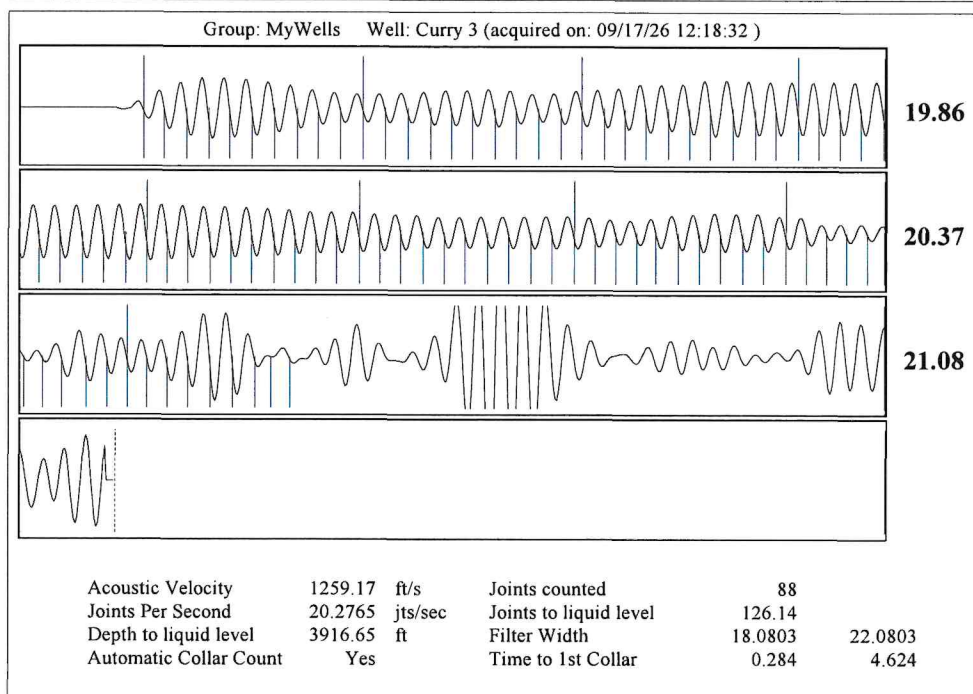
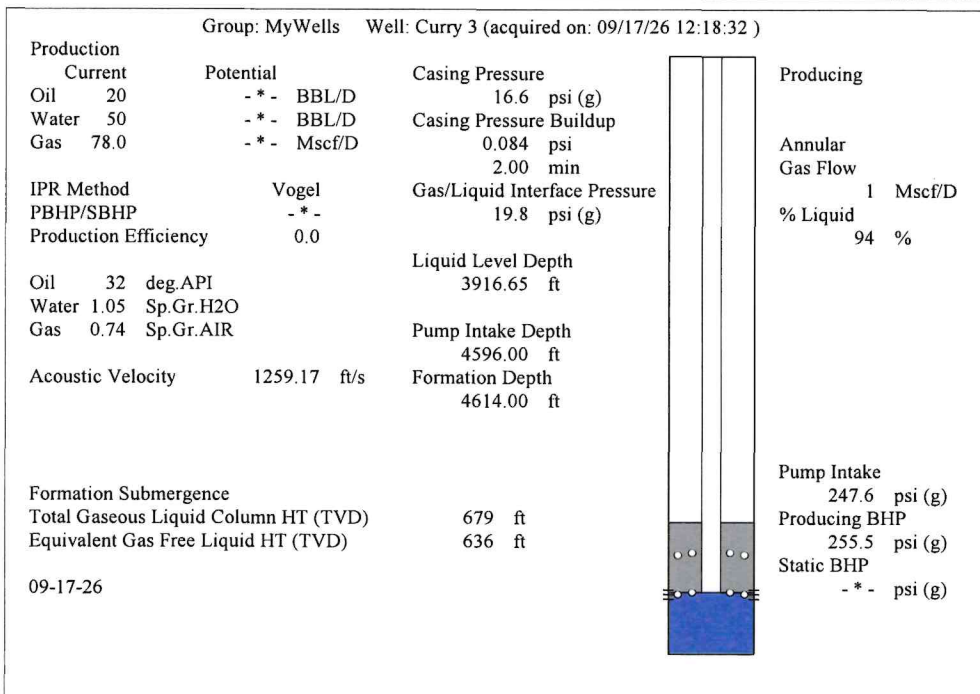
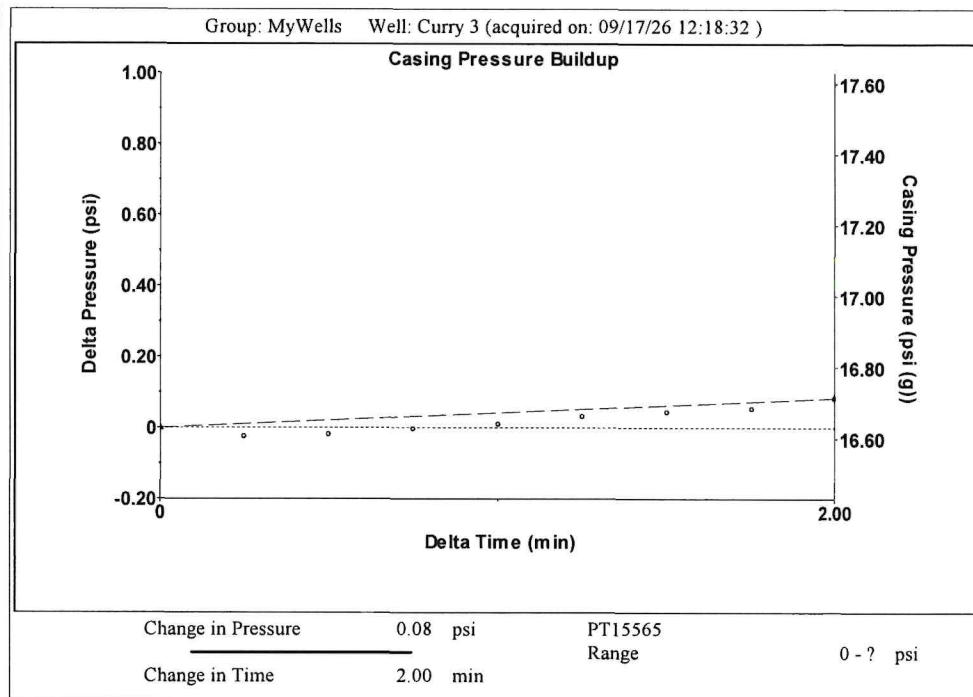
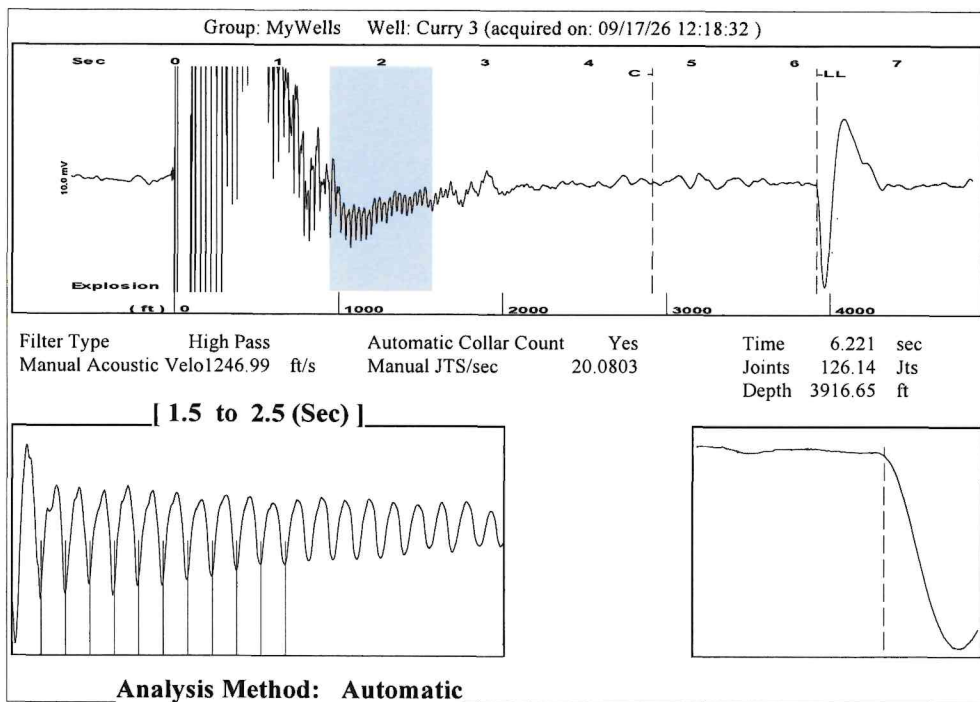
UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

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>Michael Maier</u> Comments: _____					
TA Approved: ☒ Yes ☐ Denied Date: <u>09/30/2026</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



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

Laura Kelly, Governor

09/30/2026

Anthony Farrar
Indian Oil Co., Inc.
308 S. Main St.
PO BOX 209
MEDICINE LODGE, KS 67104-0209

Re: Temporary Abandonment
API 15-151-21986-00-00
CURRY 3-32
NE/4 Sec.32-29S-13W
Pratt County, Kansas

Dear Anthony Farrar:

"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 09/30/2027.

- * 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 09/30/2027.

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

Very truly yours,

Michael Maier"