



This Form must be Typed  
Form must be Signed  
All blanks must be Filled

WELL PLUGGING APPLICATION

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,  
MUST be submitted with this form.

OPERATOR: License #: \_\_\_\_\_  
Name: \_\_\_\_\_  
Address 1: \_\_\_\_\_  
Address 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

API No. 15 - \_\_\_\_\_  
If pre 1967, supply original completion date: \_\_\_\_\_  
Spot Description: \_\_\_\_\_  
\_\_\_\_ - \_\_\_\_ - \_\_\_\_ Sec. \_\_\_\_ Twp. \_\_\_\_ S. R. \_\_\_\_  East  West  
\_\_\_\_ Feet from  North /  South Line of Section  
\_\_\_\_ Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Check One:  Oil Well  Gas Well  OG  D&A  Cathodic  Water Supply Well  Other: \_\_\_\_\_  
 SWD Permit #: \_\_\_\_\_  ENHR Permit #: \_\_\_\_\_  Gas Storage Permit #: \_\_\_\_\_

Conductor Casing Size: \_\_\_\_\_ Set at: \_\_\_\_\_ Cemented with: \_\_\_\_\_ Sacks  
Surface Casing Size: \_\_\_\_\_ Set at: \_\_\_\_\_ Cemented with: \_\_\_\_\_ Sacks  
Production Casing Size: \_\_\_\_\_ Set at: \_\_\_\_\_ Cemented with: \_\_\_\_\_ Sacks

List (ALL) Perforations and Bridge Plug Sets:

Elevation: \_\_\_\_\_ (  G.L. /  K.B. ) T.D.: \_\_\_\_\_ PBTD: \_\_\_\_\_ Anhydrite Depth: \_\_\_\_\_  
(Stone Corral Formation)

Condition of Well:  Good  Poor  Junk in Hole  Casing Leak at: \_\_\_\_\_  
(Interval)

Proposed Method of Plugging (attach a separate page if additional space is needed):

Is Well Log attached to this application?  Yes  No Is ACO-1 filed?  Yes  No

If ACO-1 not filed, explain why:

Plugging of this Well will be done in accordance with K.S.A. 55-101 et. seq. and the Rules and Regulations of the State Corporation Commission

Company Representative authorized to supervise plugging operations: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_  
Phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
Plugging Contractor License #: \_\_\_\_\_ Name: \_\_\_\_\_  
Address 1: \_\_\_\_\_ Address 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_  
Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Proposed Date of Plugging (if known): \_\_\_\_\_

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent

Submitted Electronically

**CERTIFICATION OF COMPLIANCE WITH THE  
KANSAS SURFACE OWNER NOTIFICATION ACT**

*This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.*

Select the corresponding form being filed:  C-1 (Intent)  CB-1 (Cathodic Protection Borehole Intent)  T-1 (Transfer)  CP-1 (Plugging Application)

OPERATOR: License # \_\_\_\_\_

Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

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

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Fax: ( \_\_\_\_\_ ) \_\_\_\_\_

Email Address: \_\_\_\_\_

Well Location:

\_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Sec. \_\_\_\_ Twp. \_\_\_\_ S. R. \_\_\_\_  East  West

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

*If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:*

**Surface Owner Information:**

Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

*When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.*

*If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.*

**Select one of the following:**

I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

*If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.*

I Submitted Electronically

Form	CP1 - Well Plugging Application
Operator	Shell Gulf of Mexico Inc.
Well Name	HUDGENS 3307 10-1H
Doc ID	1154649

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
5040	8411	Mississippi	

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**Hudgens 3307 10-1H**  
**PERMANENT ABANDONMENT PROCEDURE**

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**API: 15-077-21852-01-00**

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**Well Specific Objectives and Details**

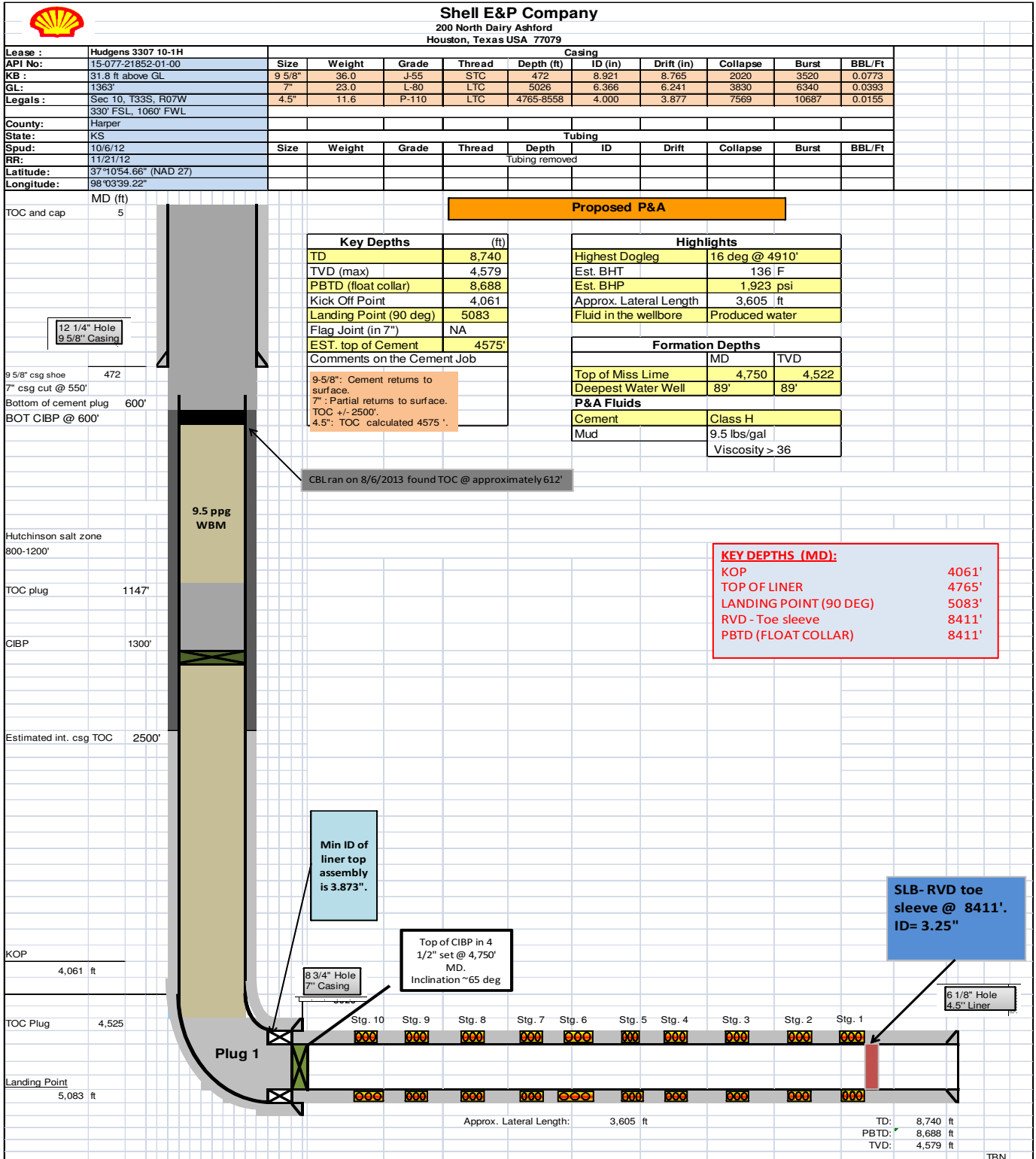
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- MIRU WOR & MIRU EWLJ.
  - For work-string:
    - Need ~1330' of 2-7/8" 6.5# J55 8rd connection tubing.
- Run a CBL log from 1400' MD to surface to verify that 7" casing is free of cement
- Set plug in 7" 23# casing.
  - Use Baker 3BB MODEL "N" MECHANICAL SET CIBP on Model K1 Snap Latch setting tool.
  - Set plug at 1300' MD.
  - Pressure test plug to 1,000 psi.
- Cut 7" intermediate casing with Baker Mechanical Cutter at 1250' MD (~50ft below Hutchinson salt zone)
  - RU S2.5 Power Swivel required to operate mechanical cutter
  - Establish circulation in well after cut
- Using 7" landing jt/ pulling tool and sting into 7" casing hanger, back out hold down pins, and pull 7" casing
  - Lay down 7" casing, test for norm, clean casing if needed, and send to Tubescope.
  - Send all documentation of well pieces removed to Silvia Keasling
- RBIH and set cement plug above CIBP from 1300' to 1200' MD (plug will be right below Hutchinson salt zone, ~ 9 BBL of cement, 100 ft plug).
  - POOH. WOC to set
  - RBIH and tag cement plug, Pressure test plug to 500 psi for 20 minutes.
- Set Parabow in 8-3/4" open hole
  - Use Baker Parabow and setting tool
  - Set Parabow at 522' MD (50 ft deeper than surface casing shoe)
- RBIH and set cement plug above Parabow in 8-3/4" from 5' to 522' MD ( cement plug length is 517' ,cement plug will be 5' below surface, ~39.4 BBL of cement ).
  - POOH. WOC to set
  - RBIH and tag cement plug, pressure test plug to 500 psi for 20 minutes.
- Cut casing at 5' MD, pull casing (5' section surface casing) and cap well with steel plate.
  - RMDO WOR.

**Hudgens 3307 10-1H**  
**PERMANENT ABANDONMENT PROCEDURE**

**API: 15-077-21852-01-00**

**Proposed Wellbore Diagram**



## Summary of Changes

Lease Name and Number: HUDGENS 3307 10-1H

API/Permit #: 15-077-21852-01-00

Doc ID: 1154649

Correction Number: 1

Field Name	Previous Value	New Value
Approved Date	06/04/2013	08/08/2013
Company Representative Authorized To Company Representative's Area Code	Brittany Niles	Morgan Westfall
Company Representative's Phone Number	281	713
Save Link	506-1446	854-9321
	<a href="http://.../kcc/detail/operatorEditDetail.cfm?docID=1145193">.../kcc/detail/operatorEditDetail.cfm?docID=1145193</a>	<a href="http://.../kcc/detail/operatorEditDetail.cfm?docID=1154649">.../kcc/detail/operatorEditDetail.cfm?docID=1154649</a>

## Summary of Attachments

Lease Name and Number: HUDGENS 3307 10-1H

API: 15-077-21852-01-00

Doc ID: 1154649

Correction Number: 1

Attachment Name

Hudgens 3307 10-1H\_Outline\_Revision

Hudgens 3307 10-1H\_Schematic\_Revision