## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form CP-1 September 2003 Form must be Typed Form must be Signed All blanks must be Filled

## **WELL PLUGGING APPLICATION**

Please TYPE Form and File ONE Copy

API # 15- 199-20117 - 00-00	(Identifier Nun	nber of this well). This	s must be listed for wells d	rilled since 1967; i	M 1
Indicate original spud or completion dat	e <u>9/87</u>				33136
Well Operator: Anadarko F&	P Company LP	Company Nama)		KCC License #: _	(Operator's)
Address: P. O. Box 1330	(Owner/C	Company Name)	City: Houst	ton	(Operator 3)
State: <b>TX</b>	Zip Code:	77251-1330	Contact Phone: 8	32 636-3128	
_ease: <u>Akers "A"</u>		Well #:1	Sec <b>12</b> Twp	. <u>15</u> R. <u>4</u>	3 East X West
- <u>cs.€                                    </u>	Spot Location	n/QQQQ County	Wallace		South Same And Storm St. A Lines Not.
330 Feet from (in exact footag	e) North / 🗶	South <i>(from nearest o</i>	utside section corner) Line	of Section (not Le	SAS CABPORATION COMMI
382 330 Feet from (in exact footag	e) East / N	West <i>(from nearest oเ</i>	utside section corner) Line	of Section (not Le	ase MAY 2 5 2004
Check One: Oil Well 🗶 Gas			Water Supply Well		CONSERVATION DIVISION
		ENHR Docke	et #	Other	WICHITA, KS
					Sacks
Conductor Casing Size:			Cemented with:		
Surface Casing Size: 8-			,		
Production Casing Size: 4-:	1/2" Set at:	5300	Cemented with:	20	0Sacks
ist (ALL) Perforations and Bridgeplug	Sets: Perfs 5	120'-5125'			
Elevation: 3936' (X	G.L. K.B.) T.D.	<b>5300</b> PBT	D <b>5245</b> Anhyd		
	<u> </u>			•	one Corral Formation)
Condition of Well:	Poor	Casing Leak	Junk in Hole		
Proposed Method of Plugging (attach a	separate page if ac	lditional space is need	led): Pump 2 sxs o	of hulls and 4	0 sxs of H cement
at 4800'. If packer canno	ot be removed,	pump 9 sxs of o	cement down tubing.	Cut off tub	ing and set cement
plugs at 2605' to 2850', 3	355' to 600',	and 4' to 50'.	Cut off and cap 8-	5/8" casing a	t 4'.
Is Well Log attached to this application	as required?	Ves X No	Is ACO-1 filed? X Ves	П No	
	1.0		is Acc-1 med: [] Tes		
If not explain why? Log was s	ubilitted with	ACO-I.			
Plugging of this Well will be done in a	accordance with K	.S.A. 55-101 <u>et. seq</u> .	and the Rules and Regu	lations of the Stat	te Corporation Commiss
ist Name of Company Representative	authorized to be in d	charge of plugging op	erations:		
Herschel Kennedy	i		Phone: <b>71</b> 9	767-8851	
Address: 15562 Highway 385	:	City/State	Cheyenne Wel	<u>ls, CO 80810</u>	······································
Plugging Contractor Eastern	Colorado	Well Servi	ee LLC KCCLI	cense # _32	997
Address 43400 Huju 40 PN Br	(Compa	ny Name) Enne Wells. (L)	80810	767-5120	(Contractor's)
	/	enne weis, ce	5-11/ 11/	Dlugo	o ol
Proposed Date and Hour of Plugging	(II KNOWN?):		9-17-04	riuggi	
Payment of the Plugging Fee (K.A.R.	82-3-118) will be g	uaranteed by Operat	tor or Agent		
Date: <u>5 - 25 - 04</u> Autho	rized Operator / Age	ent: Jen	11 n. Br		
	6 (1) 1 (1)			(Signature)	