## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

## **WELL PLUGGING APPLICATION**

Please TYPE Form and File ONE Copy

RECEIVED Form CP-1 September 2003

This Form must be Typed
Form must be Signed

CCWICH braks must be Filled September 2003

API # <b>15 -</b> 007-22845-00-00	(Identifier Number of this well).	This must be listed for wells drilled sind	ce 1967; if no API # was issued,
indicate original spud or completion date	9/10/04		
Well Operator: CLX ENERGY, INC.		KCC License #: <u>3</u> 2	451 703
Address: 518-17th Street, Su	ite 745	oity:Denver	(Operator's)
State: Colorado	Zip Code: 80202	Contact Phone: ( 303 ) 8	25- 7080
Lease: Adelhardt	Well #:1-12	Sec. 12 Twp. 30 s.	R. 11 East X West
- N/2 - SW - SE	Spot Location / QQQQ Count	y:Barber	<u> </u>
	X East / West (from neare	est outside section corner) Line of Section est outside section corner) Line of Section	
Check One: Oil Well Gas Well  SWD Docket #		Water Supply Well	
None			
		Cemented with:	
Production Casing Size: None		Cemented with:	Sacks
List (ALL) Perforations and Bridgeplug Sets:	none		P5-11118VIII 11118VIII 1118VIII 1118V
1 808	810' _		
Elevation: $1,808$ $/$ $/$ $/$ $/$ $/$ $/$ $/$ $/$ $/$ $/$	PBTD: Anh	ydrite Depth:(Stone C	Corral Formation)
Condition of Well: X Good Poor	Casing Leak Jur	ık in Hole	
Proposed Method of Plugging (attach a separate page	ne if additional space is needed):		
Spot Cement Plugs th	nrough Drill Pipe		
Is Well Log attached to this application as required?	Yes No Is ACO-1 filed	? X Yes No	
If not explain why?			
Plugging of this Well will be done in accordance	with K.S.A. 55-101 <u>et.</u> <u>seq</u> . and the	Rules and Regulations of the State C	orporation Commission.
List Name of Company Representative authorized	to be in charge of plugging operations	Mike Kerns	
		Phone: (314) 262-8	427
Address:		City / State:	
Plugging Contractor: Pickrell Dril	ling Company Inc.	_ KCC License #: _5/23	
Address: 100 3. Main Suite 503	Company Name)	2 Phone: (316)262 - 84	(Contractor's) 427
Proposed Date and Hour of Plugging (if known?):		9-17-04 Plus	red.
Payment of the Plugging Fee (K.A.R. 82-3-118) w	rill be guaranteed by Operator or Ag	ent /	,
Date: 10/8/04 Authorized Operator	- E	ent (Signature)	,