

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
**WELL PLUGGING APPLICATION**

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

*Handwritten:* 80717708

API # 15 - 003-21600-00-00 (Identifier Number of this well). This must be listed for wells drilled since 1967; if no API # was issued,

Indicate original spud or completion date \_\_\_\_\_

Well Operator: Southern Star Central Gas Pipeline KCC License #: 33097

Address: 4700 Hwy 56 (Owner / Company Name) City: Owensboro (Operator's)

State: Kentucky Zip Code: 42301 Contact Phone: (270) 852 - 4490

Lease: Rogers RODGERS Well #: 3 Sec. 15 Twp. 21 S. R. 19  East  West

NW SW SE Spot Location / QQQQ County: Anderson

1100 Feet (in exact footage) From  North /  South (from nearest outside section corner) Line of Section (Not Lease Line)

220 2420 Feet (in exact footage) From  East /  West (from nearest outside section corner) Line of Section (Not Lease Line)

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

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

Surface Casing Size: 6 1/4" Set at: 25' Cemented with: na Sacks

Production Casing Size: 2 7/8" Set at: 823.9' Cemented with: na Sacks

List (ALL) Perforations and Bridgeplug Sets: 21 shots 797' - 807'

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

Condition of Well:  Good  Poor  Casing Leak  Junk in Hole

Proposed Method of Plugging (attach a separate page if additional space is needed): Tie to 2 7/8" - establish flow rate & squeeze cement into formation until desired amount of cement and pressure is achieved, filling well to surface. Cut off pipe 3 ft below surface, cut, cap and backfill.

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

If not explain why? na

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.

List Name of Company Representative authorized to be in charge of plugging operations: \_\_\_\_\_

Bernie Rockers Phone: (785) 448 - 4816

Address: 19209 Sw Maryland rd City / State: Welda Kansas

Plugging Contractor: Splane Pulling and Roustabout Service KCC License #: 6372

Address: 5230 170th rd Chanute, Ks. (Company Name) Phone: (620) 431 - 1359 (Contractor's)

Proposed Date and Hour of Plugging (if known?): \_\_\_\_\_

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

Date: 7-11-08 Authorized Operator / Agent: Stephen C. Ryan (Signature)

RECEIVED  
KANSAS CORPORATION COMMISSION

JUL 14 2008



CORPORATION COMMISSION

Kathleen Sebelius, Governor Thomas E. Wright, Chairman Michael C. Moffet, Commissioner Joseph F. Harkins, Commissioner

**NOTICE OF RECEIPT OF WELL PLUGGING APPLICATION (CP-1)**

• SOUTHERN STAR CENTRAL GAS PIPELINE, INC.  
4700 HWY 56  
OWENSBORO, KY 42301-9303

July 22, 2008

Re: RODGERS #3  
API 15-003-21600-00-00  
15-21S-19E, 1100 FSL 2420 FEL  
ANDERSON COUNTY, KANSAS

Dear Operator:

The purpose of this letter is twofold. First, this letter is to notify you that the Conservation Division has received your plugging proposal, form CP-1; for the above well and has reviewed the proposal for completeness. The central office will now forward your CP-1 to the district office listed below for review of the proposed plugging method. **Please contact the district office for approval of your proposed plugging method at least five (5) days before plugging the well, pursuant to K.A.R. 82-3-113(b). If a workover pit will be used during the plugging of the well it must be permitted. A CDP-1 form must be filed and approved prior to the use of the pit in accordance with K.A.R. 82-3-600.**

This letter is also to notify you that during the central office's review of your CP-1 for license number verification, staff has discovered that you are not the current operator of record of the above well on file with the Conservation Division. **Central office staff is therefore requesting that you verify that you are the operator of record of the above well. The proper procedure for verifying operator authority is by filing a Conservation Division form T-1 (Request for Change of Operator; Transfer of Injection or Surface Pit Permit).** If a T-1 has already been filed with the Conservation Division reflecting the transfer of operator authority, please disregard this paragraph. If a T-1 has not been filed reflecting the transfer, please see the attached letter, which explains the T-1 filing process.

The Conservation Division's review of form CP-1, either in the central or district office, does not include an inquiry into well ownership or the filing operator's legal right to plug the well. Furthermore, this notice in no way constitutes authorization to plug the above well by persons not having legal rights of ownership or interest in the well.

**This notice is void after January 18, 2009. The CP-1 filing does not bring the above well into compliance with K.A.R. 82-3-111 with regard to the Commission's temporary abandonment requirements.**

Sincerely,

Steve Bond

Production Department Supervisor

District: #3  
1500 W. 7th  
Chanute, KS 67220  
(316) 432-2300

CONSERVATION DIVISION

Finney State Office Building, 130 S. Market, Room 2078, Wichita, KS 67202-3802  
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