

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
K.A.R. 82-3-117

Form CP-4
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

OPERATOR: License #: 33097
Name: Southern Star Central Gas Pipeline
Address 1: 4700 Hwy 56 P.O. Box 20010
Address 2: _____
City: Duaneboro State: KY Zip: 42301
Contact Person: Mark Rouse
Phone: (270) 852-4490
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic
 Water Supply Well Other: _____ SWD Permit #: _____
 ENHR Permit #: _____ Gas Storage Permit #: _____
Is ACO-1 filed? Yes No If not, Is well log attached? Yes No
Producing Formation(s): List All (If needed attach another sheet)
Squirrel Depth to Top: 822' Bottom: 855' T.D. 910'
_____ Depth to Top: _____ Bottom: _____ T.D. _____
_____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - 003-21935-00-00
Spot Description: _____
NE ~~NE~~ NE NE Sec. 22 Twp. 21 S. R. 19 East West
220' 5086 Feet from _____ South Line of Section
460' 1403 Feet from East West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Anderson
Lease Name: Benjamin-Otto Well #: 15
Date Well Completed: 6-11-82
The plugging proposal was approved on: 6-30-10 (Date)
by: Steve Bond (KCC District Agent's Name)
Plugging Commenced: 10-21-10
Plugging Completed: 10-21-10

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out
		Surface	6 5/8"	50'	
<u>Squirrel</u>		Production	2 7/8"	877'	

Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.
Rig up to 1" pipe - washed down and circulated well clean. Mixed cement until good cement returned. Puled 1" pipe. Filled tubing with cement and speeced cement into formation at 300 psi, and shutting in at 1000 psi.
67 sacks of cement used for plugging well.

Plugging Contractor License #: 34059 Name: Hurricane Services, Inc.
Address 1: P.O. Box 782228 Address 2: _____
City: Wichita State: Kansas Zip: 67278 + 2228
Phone: (316) 685-5908
Name of Party Responsible for Plugging Fees: Southern Star
State of Kentucky County, Davis, ss. _____
Steeley Barker (Print Name) Employee of Operator or Operator on above-described well.

being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and the same are true and correct, so help me God.
Signature: Steeley Barker

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

RECEIVED
NOV 24 2010
KCC WICHITA