


<b>FORM</b> <b>6</b> Rev 12/05	<b>State of Colorado</b> <b>Oil and Gas Conservation Commission</b> 1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">DE</td> <td style="width:25%;">ET</td> <td style="width:25%;">OE</td> <td style="width:25%;">ES</td> </tr> </table> Date Received: 10/27/2010  Document Number: 2592024	DE	ET	OE	ES	
DE	ET	OE	ES					
<b>WELL ABANDONMENT REPORT</b>								
<p>This form is to be submitted as an Intent to Abandon whenever an abandonment is planned on a borehole. After the abandonment is complete, this form shall again be submitted as a Subsequent Report of the actual work completed. The approved intent shall be valid for six months after the approval date, after that period, a new intent will be required. Attachments required with the Intent to Abandon are wellbore diagrams of the current configuration and the proposed configuration with plugs set.</p> <p>A Subsequent Report of Abandonment shall indicate the actual work completed. Attachments required with a Subsequent Report are a wellbore diagram showing plugs that were set and casing remaining in the hole, the job summaries from all plugging contractors used, including wireline and cementing (third party verification) and any logs that may have been run during abandonment.</p>								
OGCC Operator Number: <u>6720</u>		Contact Name: <u>TOM MCCARTHY</u>						
Name of Operator: <u>BAYLESS PRODUCER LLC* ROBERT L</u>		Phone: _____						
Address: <u>621 17TH ST STE 2300</u>		Fax: _____						
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80293</u>	Email: <u>TRM@RLBAYLESS.COM</u>					
<b>For "Intent" 24 hour notice required, COGCC contact:</b>		Name: <u>MELTON, LES</u> Tel: <u>(970) 903-5311</u> Email: <u>les.melton@state.co.us</u>						
API Number <u>05-083-05176-00</u>								
Well Name: <u>OHIO-GOVERNMENT</u>		Well Number: <u>3</u>						
Location: QtrQtr: <u>SESW</u>	Section: <u>15</u>	Township: <u>35N</u>	Range: <u>20W</u> Meridian: <u>N</u>					
County: <u>MONTEZUMA</u>		Federal, Indian or State Lease Number: <u>C-08426-7294</u>						
Field Name: <u>FLODINE PARK</u>		Field Number: <u>24055</u>						
<input type="checkbox"/> Notice of Intent to Abandon <input checked="" type="checkbox"/> Subsequent Report of Abandonment								
<i>Only Complete the Following Background Information for Intent to Abandon</i>								
Latitude: <u>37.285810</u>		Longitude: <u>-109.038010</u>						
GPS Data:								
Data of Measurement: <u>07/16/2010</u>		PDOP Reading: <u>2.7</u>	GPS Instrument Operator's Name: <u>Kenneth Werito, Sr.</u>					
Reason for Abandonment: <input type="checkbox"/> Dry <input type="checkbox"/> Production for Sub-economic <input type="checkbox"/> Mechanical Problems <input type="checkbox"/> Other _____								
Casing to be pulled: <input type="checkbox"/> Yes <input type="checkbox"/> No		Top of Casing Cement: _____						
Fish in Hole: <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, explain details below						
Wellbore has Uncemented Casing leaks: <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, explain details below						
Details: _____								
<b>Current and Previously Abandoned Zones</b>								
Formation	Code	Perf. Top	Perf. Bottom	Date	Method of Isolation	Plug Depth		
ISMAY	ISMY	5818	5884	09/02/2010	RETAINER/SQUEEZED	5768		
Total: 1 zone(s)								
<b>Casing History</b>								
Casing Type	Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bot	Cement Top	Status
SURF	12+1/4	10+3/4	40.5	224	150	224	0	
1ST	7+7/8	5+1/2	15.5	5,964	150	5,964	5,131	CALC

## Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 5768 with 20 sacks cmt on top. CIPB #2: Depth 1074 with \_\_\_\_\_ sacks cmt on top.  
 CIBP #3: Depth \_\_\_\_\_ with \_\_\_\_\_ sacks cmt on top. CIPB #4: Depth \_\_\_\_\_ with \_\_\_\_\_ sacks cmt on top.  
 CIBP #5: Depth \_\_\_\_\_ with \_\_\_\_\_ sacks cmt on top.

NOTE: Two(2) sacks cement required on all CIBPs.

Set <u>40</u> sks cmt from <u>819</u> ft. to <u>1114</u> ft. in	Plug Type: <u>CASING</u>	Plug Tagged: <input type="checkbox"/>
Set <u>20</u> sks cmt from <u>5768</u> ft. to <u>5550</u> ft. in	Plug Type: <u>CASING</u>	Plug Tagged: <input checked="" type="checkbox"/>
Set <u>30</u> sks cmt from <u>4828</u> ft. to <u>4608</u> ft. in	Plug Type: <u>CASING</u>	Plug Tagged: <input type="checkbox"/>
Set <u>12</u> sks cmt from <u>3028</u> ft. to <u>2940</u> ft. in	Plug Type: <u>CASING</u>	Plug Tagged: <input type="checkbox"/>
Set <u>12</u> sks cmt from <u>1837</u> ft. to <u>1749</u> ft. in	Plug Type: <u>CASING</u>	Plug Tagged: <input type="checkbox"/>

Perforate and squeeze at 4828 ft. with 17 sacks. Leave at least 100 ft. in casing 4771 CICR Depth  
 Perforate and squeeze at 3077 ft. with 35 sacks. Leave at least 100 ft. in casing 3028 CICR Depth  
 Perforate and squeeze at 1885 ft. with 35 sacks. Leave at least 100 ft. in casing 274 CICR Depth

(Cast Iron Cement Retainer Depth)

Set 150 sacks half in. half out surface casing from 0 ft. to 274 ft. Plug Tagged: ☐

Set \_\_\_\_\_ sacks at surface

Cut four feet below ground level, weld on plate Above Ground Dry-Hole Marker: ☐ Yes ☒ No

Set \_\_\_\_\_ sacks in rat hole Set \_\_\_\_\_ sacks in mouse hole

### Additional Plugging Information for Subsequent Report Only

Casing Recovered: \_\_\_\_\_ ft. of \_\_\_\_\_ inch casing

Plugging Date: 09/03/2010

\*Wireline Contractor: \_\_\_\_\_

\*Cementing Contractor: A Plus Well Service

Type of Cement and Additives Used: Neat G

Flowline/Pipeline has been abandoned per Rule 1103 ☐ Yes ☐ No

\*ATTACH JOB SUMMARY

Technical Detail/Comments:

CUT FOUR FEET BELOW GROUND LEVEL, WELD ON PLATE

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: \_\_\_\_\_

Print Name: TOM MCCARTHY

Title: PETROLEUM ENGINEER

Date: 10/25/2010

Email: TRM@RLBAYLESS.COM

Based on the information provided herein, this Well Abandonment Report (Form 6) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: BURN, DIANA

Date: 3/15/2011

**CONDITIONS OF APPROVAL, IF ANY:**

**Attachment Check List**

Att Doc Num	Name
2592024	FORM 6 SUBSEQUENT SUBMITTED
2592025	OPERATIONS SUMMARY

Total Attach: 2 Files

**General Comments**

User Group	Comment	Comment Date

Total: 0 comment(s)