

FORM
6Rev
12/05State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:

401538307

Date Received:

WELL ABANDONMENT REPORT

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.

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.

OGCC Operator Number: 69175

Contact Name: Kelsi Welch

Name of Operator: PDC ENERGY INC

Phone: (303) 831-3974

Address: 1775 SHERMAN STREET - STE 3000

Fax:

City: DENVER State: CO Zip: 80203

Email: kelsi.welch@pdce.com

For "Intent" 24 hour notice required,

Name: O'Donnell, Shaun

Tel: (720) 305-8280

COGCC contact:

Email: shaun.odonnell@state.co.us

API Number 05-123-14772-00

Well Name: HAMILTON

Well Number: 32-25

Location: QtrQtr: SWNE Section: 25 Township: 5N Range: 65W Meridian: 6

County: WELD

Federal, Indian or State Lease Number: 62148

Field Name: WATTENBERG

Field Number: 90750

☒ Notice of Intent to Abandon☐ Subsequent Report of Abandonment

Only Complete the Following Background Information for Intent to Abandon

Latitude: 40.371389

Longitude: -104.608333

GPS Data:

Date of Measurement: 04/16/2010

PDOP Reading: 1.6

GPS Instrument Operator's Name: Chuck Kraft

Reason for Abandonment:

☐ Dry☒ Production Sub-economic☐ Mechanical Problems☐ OtherCasing to be pulled: ☐ Yes☒ No

Estimated Depth:

Fish in Hole: ☐ Yes☒ No

If yes, explain details below

Wellbore has Uncemented Casing leaks: ☐ Yes☒ No

If yes, explain details below

Details:

Current and Previously Abandoned Zones

| Formation | Perf. Top | Perf. Btm | Abandoned Date | Method of Isolation | Plug Depth |
|-----------|-----------|-----------|----------------|---------------------|------------|
| CODELL | 6990 | 7006 | | | |
| NIOBRARA | 6746 | 6882 | | | |

Total: 2 zone(s)

Casing History

| Casing Type | Size of Hole | Size of Casing | Weight Per Foot | Setting Depth | Sacks Cement | Cement Bot | Cement Top | Status |
|-------------|--------------|----------------|-----------------|---------------|--------------|------------|------------|--------|
| SURF | 12+1/4 | 8+5/8 | 24 | 262 | 190 | 262 | 0 | |
| 1ST | 7+7/8 | 3+1/2 | 9.3 | 7,040 | 230 | 7,040 | 6,382 | CALC |
| S.C. 1.1 | | | | 650 | 400 | 650 | 0 | |

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 6696 with 2 sacks cmt on top. CIBP #2: Depth _____ with _____ sacks cmt on top.
CIBP #3: Depth _____ with _____ sacks cmt on top. CIBP #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 40 sks cmt from 800 ft. to 0 ft. Plug Type: CASING Plug Tagged: ☐
Set _____ sks cmt from _____ ft. to _____ ft. Plug Type: _____ Plug Tagged: ☐
Set _____ sks cmt from _____ ft. to _____ ft. Plug Type: _____ Plug Tagged: ☐
Set _____ sks cmt from _____ ft. to _____ ft. Plug Type: _____ Plug Tagged: ☐
Set _____ sks cmt from _____ ft. to _____ ft. Plug Type: _____ Plug Tagged: ☐

Perforate and squeeze at 2950 ft. with 165 sacks. Leave at least 100 ft. in casing 2665 CICR Depth

Perforate and squeeze at _____ ft. with _____ sacks. Leave at least 100 ft. in casing _____ CICR Depth

Perforate and squeeze at _____ ft. with _____ sacks. Leave at least 100 ft. in casing _____ CICR Depth

(Cast Iron Cement Retainer Depth)

Set _____ sacks half in. half out surface casing from _____ ft. to _____ 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: _____

*Wireline Contractor: _____ *Cementing Contractor: _____

Type of Cement and Additives Used: _____

Flowline/Pipeline has been abandoned per Rule 1103 ☐ Yes ☐ No *ATTACH JOB SUMMARY

Technical Detail/Comments:

Hamilton 32-25 (05-123-14772)/Plugging Procedure (Intent)
Producing Formation: Niobrara: 6746'-6882' Codell: 6990'-7006'
Upper Pierre Aquifer: 2762'-2848'
TD: 7084' PBTD: 7017'
Surface Casing: 8 5/8" 24# @ 262' w/ 190 sxs
Production Casing: 3 1/2" 9.3# @ 7040' w/ 230 sxs cmt (TOC @ 6382' - Calculated). Annular fill w/ 400 sxs 650'-Surface.

Tubing: 2 1/16" tubing set @ 6983' (3/5/2014).

Proposed Procedure:

1. MIRU pulling unit. Pull 2 1/16" tubing.
2. RU wireline company.
3. TIH with CIBP. Set BP at 6696'. Top with 2 sxs 15.8#/gal CI G cement.
4. Shoot lower squeeze holes at 2950'. Shoot upper squeeze holes at 2650'.
5. Set CICR at 2665'. RU cementing company. Sting in and pump 165 sxs 15.8#/gal CI G cement. Sting out and pump 10 sxs on top of CICR.
6. Pick up tubing to 800'. Mix and pump 40 sxs 15.8#/gal CI G cement down tubing. Cement should circulate to surface.
7. Cut surface casing 6' below ground level and weld on cap.

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

Signed: _____ Print Name: Kelsi Welch

Title: Production Tech Date: _____ Email: kelsi.welch@pdce.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: _____

Date: _____

CONDITIONS OF APPROVAL, IF ANY: _____

Expiration Date: _____

COA Type

Description

| | |
|--|--|
| | |
|--|--|

Attachment Check List

Att Doc Num

Name

| | |
|-----------|------------------|
| 401538308 | WELLBORE DIAGRAM |
| 401538309 | WELLBORE DIAGRAM |
| 401538310 | GYRO SURVEY |

Total Attach: 3 Files

General Comments

User Group

Comment

Comment Date

| | | |
|--|--|------------------------|
| | | Stamp Upon Approval |
|--|--|------------------------|

Total: 0 comment(s)