

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



DE ET OE ES

Document Number:

401553393

Date Received:

02/23/2018

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: 47120

Contact Name: CHERYL LIGHT

Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP

Phone: (720) 929-6461

Address: P O BOX 173779

Fax: (720) 929-7461

City: DENVER State: CO Zip: 80217-

Email: cheryl.light@anadarko.com

For "Intent" 24 hour notice required,

Name: Carlile, Craig

Tel: (970) 629-8279

COGCC contact:

Email: craig.carlile@state.co.us

API Number 05-123-29522-00

Well Name: NEWBY

Well Number: 14-33

Location: QtrQtr: SWSW Section: 33 Township: 3N Range: 68W Meridian: 6

County: WELD

Federal, Indian or State Lease Number:

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: 40.178489

Longitude: -105.012525

GPS Data:

Date of Measurement: 05/15/2009

PDOP Reading: 2.4

GPS Instrument Operator's Name: CODY MATTSO

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

Estimated Depth: 1400

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	7355	7375			
NIOBRARA	7089	7234			

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	903	570	903	0	VISU
1ST	7+7/8	4+1/2	11.6	7,927	730	7,927	2,348	CBL

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 7030 with 25 sacks cmt on top. CIPB #2: Depth 3740 with 2 sacks cmt on top.
CIBP #3: Depth 80 with 25 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>25</u> sks cmt from <u>7030</u> ft. to <u>6630</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input type="checkbox"/>
Set <u>130</u> sks cmt from <u>1500</u> ft. to <u>1200</u> ft.	Plug Type: <u>STUB PLUG</u>	Plug Tagged: <input checked="" type="checkbox"/>
Set _____ sks cmt from _____ ft. to _____ ft.	Plug Type: _____	Plug Tagged: <input type="checkbox"/>
Set _____ sks cmt from _____ ft. to _____ ft.	Plug Type: _____	Plug Tagged: <input type="checkbox"/>
Set _____ sks cmt from _____ ft. to _____ ft.	Plug Type: _____	Plug Tagged: <input type="checkbox"/>

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

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

(Cast Iron Cement Retainer Depth)

Set 240 sacks half in. half out surface casing from 1200 ft. to 853 ft. Plug Tagged: ☒

Set 25 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. _____ inch casing Plugging Date: _____
of _____

*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:

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

Signed: _____ Print Name: CHERYL LIGHT

Title: SR REGULATORY ANALYST Date: 2/23/2018 Email: DJREGULATORY@ANADARKO.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: McCoy, Diane Date: 3/20/2018

CONDITIONS OF APPROVAL, IF ANY: _____

Expiration Date: 9/19/2018

COA Type	Description
	<p>1) Provide 48 hour notice of plugging MIRU via electronic Form 42.</p> <p>2) Properly abandon all flowlines as per Rule 1103. File electronic Form 42 once abandonment complete.</p> <p>3) Operator shall implement measures to control unnecessary and excessive venting, to protect the health and safety of the public, and to ensure that vapors and odors from well plugging operations do not constitute a nuisance or hazard to public welfare.</p> <p>4) After pumping stub plug, shut down at minimum 8 hours; verify gas migration has been eliminated. If evidence of gas migration or pressure remains contact COGCC Engineer for an update to plugging orders. Leave at least 100' of cement in the wellbore for each plug.</p>
	<p>Prior to starting plugging operations a bradenhead test shall be performed.</p> <p>1) If, before opening the bradenhead valve, the beginning pressure is greater than 25 psi, sampling is required.</p> <p>2) If pressure remains at the conclusion of the test, or if any liquids were present during the test, sampling is required.</p> <p>The Form 17 shall be submitted within 10 days of the test. Sampling shall comply with Operator Guidance - Bradenhead Testing and Reporting Instructions. If samples are collected, copies of all final laboratory analytical results shall be provided to the COGCC within three (3) months of collecting the samples.</p>

Attachment Check List

Att Doc Num	Name
401553393	FORM 6 INTENT SUBMITTED
401553404	PROPOSED PLUGGING PROCEDURE
401553405	WELLBORE DIAGRAM

Total Attach: 3 Files

General Comments

User Group	Comment	Comment Date
Public Room	Pass	03/07/2018
Permit	pass	02/28/2018

Total: 2 comment(s)