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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 05-123-24170-00 Well Number: 29-24
 Well Name: REYNOLDS
 Location: QtrQtr: NENW Section: 24 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: 40.217330 Longitude: -104.953660
 GPS Data:
 Date of Measurement: 02/27/2007 PDOP Reading: 3.7 GPS Instrument Operator's Name: CHRIS FISHER
 Reason for Abandonment: Dry Production Sub-economic Mechanical Problems
 Other _____
 Casing to be pulled: Yes No Estimated Depth: 885
 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
NIOBRARA	7119	7402			
Total: 1 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	782	530	782	0	VISU
1ST	7+7/8	4+1/2	11.6	7,530	540	7,530	3,404	CBL

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 7065 with 25 sacks cmt on top. CIBP #2: Depth 3970 with 2 sacks cmt on top.
 CIBP #3: Depth 80 with 25 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 25 sks cmt from 7065 ft. to 6665 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 _____ 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 140 sacks half in. half out surface casing from 985 ft. to 732 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. 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:

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: Staff Regulatory Analyst Date: _____ 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: _____ Date: _____

CONDITIONS OF APPROVAL, IF ANY: _____ Expiration Date: _____

COA Type	Description

Attachment Check List

Att Doc Num	Name
401597939	PROPOSED PLUGGING PROCEDURE
401597940	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)