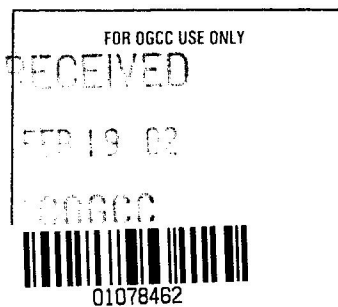




Larry?

State of Colorado
Oil and Gas Conservation Commission

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



WELL ABANDONMENT REPORT

Submit original plus one copy. This form is to be submitted as an intent whenever a plugging is planned on a borehole. The approved intent shall be valid for six months after the approval date; after that period a new intent will be required. After the plugging is complete, this form and one copy shall again be submitted as a subsequent report of the work as actually completed.

OGCC Operator Number: <u>8840</u>	Contact Name and Telephone <u>Tim Hager</u>	24 hour notice required, contact:
Name of Operator: <u>Blue Chip Oil Inc</u>	No: <u>970-443-6456</u>	
Address: <u>19 Old Town Square #238</u>	Fax: <u>970-482-0281</u>	
City: <u>FT. Collins</u> State: <u>CO</u> Zip: <u>80524</u>	Tel:	

API Number: <u>05-123-11855</u>	OGCC Lease No.: _____	Other wells this lease? <input type="checkbox"/> Y <input type="checkbox"/> N
Well Name: <u>Coan</u>	Well Number: <u>18-44</u>	
Location (QtrQtr, Sec, Twp, Rng, Meridian): <u>SE SE Sec 18, 1N-63W</u>		
County: <u>Weld</u>	Federal, Indian or State Lease Number: _____	
Field Name: <u>Barbwire</u>	Field Number: <u>5215</u>	

Complete the Attachment Checklist	
Oper	OGCC
Wellbore Diagram	
Cement Job Summary	
Wireline Job Summary	

☐ Notice of Intent to Abandon

☒ Subsequent Report of Abandonment

Only Complete the Following Background Information for Intent to Abandon

Reason for Abandonment:	<input type="checkbox"/> Dry	<input type="checkbox"/> Production 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: _____				

Current and Previously Abandoned Zones

Formation	Perforations - Top	Perforations - Bottom	Date Abandoned	Method of Isolation (None, Squeezed, BP, Cement, etc.)	Plug Depth

Casing History

Casing String	Casing Size	Casing Depth	Cement Top	Stage Cement Top
<u>Surface</u>	<u>9 5/8</u>	<u>210'</u>	<u>0'</u>	

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth _____ with _____ sacks cmt on top.		CIBP #2: Depth _____ with _____ sacks cmt on top.		NOTE: Two (2) sacks cement required on all CIBPs.	
Set <u>80</u> sks cmt from <u>800 760</u> ft. to <u>500</u> ft. in <input type="checkbox"/> Casing <input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Annulus	Set _____ sks cmt from _____ ft. to _____ ft. in <input type="checkbox"/> Casing <input type="checkbox"/> Open Hole <input type="checkbox"/> Annulus	Set _____ sks cmt from _____ ft. to _____ ft. in <input type="checkbox"/> Casing <input type="checkbox"/> Open Hole <input type="checkbox"/> Annulus	Set _____ sks cmt from _____ ft. to _____ ft. in <input type="checkbox"/> Casing <input type="checkbox"/> Open Hole <input type="checkbox"/> Annulus	Set _____ sks cmt from _____ ft. to _____ ft. in <input type="checkbox"/> Casing <input type="checkbox"/> Open Hole <input type="checkbox"/> Annulus	Set _____ sks cmt from _____ ft. to _____ ft. in <input type="checkbox"/> Casing <input type="checkbox"/> Open Hole <input type="checkbox"/> Annulus
Perforate and squeeze at _____ ft. with _____ sacks		Leave at least 100 ft. in casing			
Perforate and squeeze at _____ ft. with _____ sacks		Leave at least 100 ft. in casing			
Perforate and squeeze at _____ ft. with _____ sacks		Leave at least 100 ft. in casing			
Set <u>50</u> sacks half in, half out surface casing from <u>260</u> ft. to <u>160</u> ft.					
Set <u>10</u> sacks at surface					
Cut four feet below ground level, weld on plate		Dry-Hole Marker: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: <u>2/14/02</u>
*Wireline Contractor: _____	
*Cementing Contractor: <u>Western White</u>	
Type of Cement and Additives Used: <u>neat</u>	

*Attach Job Summaries.

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

Print Name: <u>Tim Hager</u>	
Signed: <u>Tim Hager</u>	Title: <u>President</u> Date: <u>2.14.02</u>

OGCC Approved: <u>Jerry Pollock</u>	Title: <u>Eug</u> Date: <u>3/13/02</u>
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CONDITIONS OF APPROVAL, IF ANY:

Approval granted pending OGCC inspection of surface reclamation

RECEIVED

JOB LOG

WESTERN WELLSITE SERVICES, LLC

17509 Rd 14
Fort Morgan, Co. 80701

FEB 19 02

COGCC

OPERATOR	Blue Chip Oil FNC
WELL	Coan 1844
LOCATION	SESE 18 - 1N 63W
DATE	2-14-02

THE FOLLOWING WORK WAS PERFORMED:

Pumped	80 sks	760' and up
Pumped	50 sks	260' and up
Pumped	10 sks	in Top Surface

Wireline Contractor

NA

Cement Contractor

Western Wellsite

Dirtwork Contractor

NA

Reseeding Contractor

NA

SIGNED

Jack Brunell