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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: 27635 Contact Name: JACK MCCARTNEY
 Name of Operator: ENERGY SEARCH CO ADDBA ENERGY SEARCH CO Phone: (303) 830-7208
 Address: PO BOX 1896 Fax: (303) 830-7004
 City: EDWARDS State: CO Zip: 81632 Email: jack@mccartneyengineering.com

For "Intent" 24 hour notice required, Name: Beardslee, Tom Tel: (970) 420-3935
 COGCC contact: Email: tom.beardslee@state.co.us

API Number 05-001-08804-00
 Well Name: GREEN Well Number: 2
 Location: QtrQtr: NWNW Section: 18 Township: 1S Range: 67W Meridian: 6
 County: ADAMS Federal, Indian or State Lease Number: _____
 Field Name: SPINDLE Field Number: 77900

Notice of Intent to Abandon Subsequent Report of Abandonment

Only Complete the Following Background Information for Intent to Abandon

Latitude: 39.970322 Longitude: -104.938059
 GPS Data:
 Date of Measurement: 06/14/2012 PDOP Reading: 4.1 GPS Instrument Operator's Name: Sarah Burkhalter
 Reason for Abandonment: Dry Production Sub-economic Mechanical Problems
 Other _____
 Casing 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 |
|------------------|-----------|-----------|----------------|---------------------|------------|
| SUSSEX | 5025 | 5069 | | | |
| 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 | 172 | 150 | 172 | 0 | VISU |
| 1ST | 7+7/8 | 4+1/2 | 10.5 | 5,208 | 175 | 5,208 | 4,430 | CBL |
| S.C. 1.1 | | | | 1,236 | 86 | 1,236 | 120 | CALC |

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 4925 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 50 sks cmt from 1265 ft. to 700 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 2550 ft. with 40 sacks. Leave at least 100 ft. in casing 2530 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 65 sacks half in. half out surface casing from 225 ft. to 0 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. _____ inch casing Plugging Date: _____
of _____
*Wireline Contractor: _____ *Cementing Contractor: _____
Type of Cement and Additives Used: _____
Flowline/Pipeline has been abandoned per Rule 1105 Yes No *ATTACH JOB SUMMARY

Technical Detail/Comments:

1. MIRU service unit, blow down & kill well if necessary.
2. Pull & lay down rods & pump.
3. RU BOP's, pull tubing standing back approximately 2550' in derrick & laying down rest.
4. RU wireline unit, set CIBP @ 4925', place 2 sks cmt on CIBP.
5. Fill hole with fresh water and circulate out oil, pressure test to 300 psig or higher for 15 minutes.
6. Run bond log from 1400' to surface, email log to COGCC representative.
7. RU wireline unit, perforate at 2550'.
8. RD wireline unit, run CICR to 2530', squeeze perforations with 40 sks leaving 100' above CICR.
9. If insufficient cement coverage over Fox Hills and Lower Laramie formations, check with COGCC representative for further instructions.
10. If adequate cement coverage of aquifers, RU cementer and set balanced plug from 1265' - 700' with 50 sks, tag plug.
11. Depending on cement coverage behind casing, fill 4 1/2" casing and annulus from 225' to surface with approximately 65 sks.
12. Flush flowlines to battery.
13. RDMO rig.
14. Cut off casing and weld on cap with well identification data at a minimum of 4' below surface.
15. Remove flowlines and battery equipment.
16. Check for soil contamination at well location, flowlines, and battery facilities and respond accordingly.

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

Signed: _____ Print Name: JACK
Title: MCCARTNEY Date: _____ Email: jack@mccartneyengineering.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

| COA Type | Description |
|----------|-------------|
| | |

Attachment Check List

Att Doc Num

Name

| Att Doc Num | Name |
|-------------|------------------|
| 401746595 | WELLBORE DIAGRAM |
| 401746596 | WELLBORE DIAGRAM |

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

| User Group | Comment | Comment Date |
|------------|---------|---------------------|
| | | Stamp Upon Approval |

Total: 0 comment(s)