

**FORM**  
**6**  
Rev  
05/18

**State 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
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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: <u>69175</u>	Contact Name: <u>Valerie Danson</u>
Name of Operator: <u>PDC ENERGY INC</u>	Phone: <u>(970) 506-9272</u>
Address: <u>1775 SHERMAN STREET - STE 3000</u>	Fax: _____
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80203</u>	Email: <u>valerie.danson@pdce.com</u>
<b>For "Intent" 24 hour notice required,</b> Name: <u>Silver, Randy</u> Tel: <u>(720) 827-6688</u>	
<b>COGCC contact:</b> Email: <u>randy.silver@state.co.us</u>	

API Number <u>05-123-26314-00</u>	Well Number: <u>21-13</u>
Well Name: <u>GUTTERSEN</u>	
Location: QtrQtr: <u>NENW</u> Section: <u>13</u> Township: <u>3N</u> Range: <u>64W</u> Meridian: <u>6</u>	
County: <u>WELD</u> Federal, Indian or State Lease Number: _____	
Field Name: <u>WATTENBERG</u> Field Number: <u>90750</u>	

Notice of Intent to Abandon       Subsequent Report of Abandonment

*Only Complete the Following Background Information for Intent to Abandon*

Latitude: 40.230690 Longitude: -104.502060

GPS Data:  
Date of Measurement: 06/24/2008 PDOP Reading: 1.3 GPS Instrument Operator's Name: HOLLY L. TRACY

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
NIOBRARA-CODELL	6594	6815			

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	698	520	698	0	VISU
1ST	7+7/8	4+1/2	10.5	7,003	915	7,003	0	CBL

## Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 6544 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 1800 ft. to 1300 ft. Plug Type: CASING Plug Tagged:   
Set 75 sks cmt from 898 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:   
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 \_\_\_\_\_ 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. \_\_\_\_\_ 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:

Guttersen 21-13 (05-123-26314)/Plugging Procedure (Intent)  
Producing Formation: Niobrara/Codell: 6594'-6815'  
Upper Pierre Aquifer: 660'-1540'  
TD: 7018' PBTD: 6948'  
Surface Casing: 8 5/8" 24# @ 698' w/ 520 sxs cmt  
Production Casing: 4 1/2" 10.5# @ 7003' w/ 915 sxs cmt (TOC @ Surface' - CBL).  
Tubing: 2 3/8" tubing set @ 6795' (10/24/2008).  
Proposed Procedure:  
1. MIRU pulling unit. Pull 2 3/8" tubing.  
2. RU wireline company.  
3. TIH with CIBP. Set BP at 6544'. Top with 2 sxs 15.8#/gal CI G cement.  
4. TIH with tubing to 1800'. RU cementing company. Mix and pump 40 sxs 15.8#/gal CI G cement down tubing (Pierre coverage from 1800'-1300').  
5. Pick up tubing to 898'. Mix and pump 75 sxs 15.8#/gal CI G cement down tubing. Cement should circulate to surface. TOOH with tubing.  
6. 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: Valerie Danson  
Title: Reg Tech Date: \_\_\_\_\_ Email: valerie.danson@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**

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**Attachment Check List**

**Att Doc Num**

**Name**

401916098	WELLBORE DIAGRAM
401916100	WELLBORE DIAGRAM
401916103	GYRO SURVEY

Total Attach: 3 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)