

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>
For "Intent" 24 hour notice required, Name: <u>Evins, Bret</u> Tel: <u>(970) 420-6699</u>	
COGCC contact: Email: <u>bret.evins@state.co.us</u>	

API Number <u>05-123-26854-00</u>	Well Number: <u>36A</u>
Well Name: <u>WELLS RANCH</u>	
Location: QtrQtr: <u>SWNW</u> Section: <u>36</u> Township: <u>6N</u> Range: <u>63W</u> Meridian: <u>6</u>	
County: <u>WELD</u> Federal, Indian or State Lease Number: <u>9518.8</u>	
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: 40.446560 Longitude: -104.390530

GPS Data:
Date of Measurement: 07/28/2008 PDOP Reading: 1.6 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	6558	6739			
J SAND	7197	7204	10/06/2008	B PLUG CEMENT TOP	7148
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	601	460	601	0	VISU
1ST	7+7/8	4+1/2	10.5	7,325	285	7,325	5,929	CBL
S.C. 1.1				4,877	585	4,877	0	CBL

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 6508 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 5125 ft. to 4625 ft. Plug Type: CASING Plug Tagged:
 Set 40 sks cmt from 1900 ft. to 1400 ft. Plug Type: CASING Plug Tagged:
 Set 65 sks cmt from 801 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:

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. of _____ inch casing Plugging Date: _____
 *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:

Wells Ranch 36A (05-123-26854) Plugging Procedure (Intent)
 Producing Formation: Niobrara/Codell: 6558'-6739' J-Sand: 7197'-7204'
 Upper Pierre Aquifer: 580'-1660'
 TD: 7329' PBSD: 6841.6'
 Surface Casing: 8 5/8" 24# @ 601' w/ 460 sxs
 Production Casing: 4 1/2" 10.5# @ 7325' w/ 285 sxs cmt (TOC @ 5929' - CBL).
 Annular Fill @ 4877' w/ 585 sxs cmt (TOC @ surface - CBL) with DV Tool @ 4875'.
 Existing CIBP @ 7148' w/ 2 sxs cmt (10/6/2008).
 Tubing: 2 3/8" tubing set @ 6716.1' (4/23/2014).
 Proposed Procedure:
 1. MIRU pulling unit. Pull 2 3/8" tubing.
 2. RU wireline company.
 3. TIH with CIBP. Set BP at 6508'. Top with 2 sxs 15.8#/gal CI G cement.
 4. TIH with tubing to 5125'. RU cementing company. Mix and pump 40 sxs 15.8#/gal CI G cement down tubing (DV Tool coverage from 5125'-4625').
 5. Pick up tubing to 1900'. Mix and pump 40 sxs 15.8#/gal CI G cement down tubing (Pierre coverage from 1900'-1400').
 6. Pick up tubing to 801'. Mix and pump 65 sxs 15.8#/gal CI G cement down tubing. Cement should circulate to surface. TOO H with tubing.
 7. 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

Attachment Check List

Att Doc Num	Name
401966581	WELLBORE DIAGRAM
401966582	WELLBORE DIAGRAM
401966583	GYRO SURVEY

Total Attach: 3 Files

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)