

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



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402099954

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: 10110

Contact Name: Renee Kendrick

Name of Operator: GREAT WESTERN OPERATING COMPANY LLC

Phone: (720) 595-2114

Address: 1001 17TH STREET #2000

Fax:

City: DENVER

State: CO

Zip: 80202

Email: rkendrick@gwogco.com

**For "Intent" 24 hour notice required,**

Name: Santistevan, Brittani

Tel: (720) 471-1110

**COGCC contact:**

Email: brittani.santistevan@state.co.us

API Number 05-123-05482-00

Well Name: UPRR

Well Number: 13

Location: QtrQtr: NWNW

Section: 31

Township: 8N

Range: 66W

Meridian: 6

County: WELD

Federal, Indian or State Lease Number:

Field Name: BLACK HOLLOW

Field Number: 6835

☒ Notice of Intent to Abandon☐ Subsequent Report of Abandonment*Only Complete the Following Background Information for Intent to Abandon*

Latitude: 40.623460

Longitude: -104.829100

GPS Data:

Date of Measurement: 04/10/2006

PDOP Reading: 6.0

GPS Instrument Operator's Name: LUKE MATZKE

Reason for Abandonment: ☐ Dry☒ Production Sub-economic☐ Mechanical Problems☐ OtherCasing to be pulled: ☒ Yes☐ No

Estimated Depth: 1000

Fish in Hole: ☒ Yes☐ No

If yes, explain details below

Wellbore has Uncemented Casing leaks: ☐ Yes☒ No

If yes, explain details below

Details: During routine maintenance tubing was stuck and had to be cut after several days of fishing it was determined that casing collapsed around 6708'. Several more attempts were made to recover the fish without any success.

- Tubing was cut @ 6734'

- Milled tubing to 6810'

- Fill on fish to 6718' never could get back to top of fish

**Current and Previously Abandoned Zones**

Formation	Perf. Top	Perf. Btm	Abandoned Date	Method of Isolation	Plug Depth
LYONS	9012	9047			

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	9+5/8	36	317	225	317	0	CALC
1ST	7+7/8	5+1/2	17	9,085	450	9,085	6,915	CALC

## Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth \_\_\_\_\_ with \_\_\_\_\_ sacks cmt on top. CIPB #2: Depth \_\_\_\_\_ with \_\_\_\_\_ sacks cmt on top.  
CIBP #3: Depth \_\_\_\_\_ with \_\_\_\_\_ sacks cmt on top. CIPB #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 250 sks cmt from 6700 ft. to 6100 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 2500 ft. with 170 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 445 sacks half in. half out surface casing from 1050 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:

Procedure:

- 1 Contact COGCC 24 hr before MIRU
- 2 MIRU
- 3 Blow down and kill well
- 4 NDWH/NUBOP
- 5 Roll hole clean
- 6 Release flowback separator and flare stack if no longer needed
- 7 Pump 250sx Class G From 6700'
- 8 Hold pressure and displace 100sx behind casing
- 9 TOO, Perforate at 2500'
- 10 Verify all fluid migration has been stopped
- 11 TIH and Pump 170sx class G balanced plug from 2500' to 2100'
- 12 WOC 4 hours, tag plug, verify no migration
- 13 POOH, Cut casing at 1000' TOO with 5-1/2" casing
- 14 Pump 450sx Class G from 1000' to surface. Top off as needed.
- 15 RDMO
- 16 Cut & cap casing 4' - 6' below GL w/ plate (Well Name, API, Legal Location)

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

Signed: \_\_\_\_\_ Print Name: Renee Kendrick  
Title: Senior Regulatory Analyst Date: \_\_\_\_\_ Email: rkendrick@gwogco.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**

402099994	WELLBORE DIAGRAM
402099997	WELLBORE DIAGRAM

Total Attach: 2 Files

**General Comments**

**User Group** **Comment**

**Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)