



State of Colorado  
Oil and Gas Conservation Commission  
DEPARTMENT OF NATURAL RESOURCES

WELL ABANDONMENT REPORT

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

FOR OGCC USE ONLY



01339699

ET OE PR ES

24 hour notice required, contact

Complete the  
Attachment Checklist

Oper OGCC

Wellbore Diagram  
Cement Job Summary  
Wireline Job Summary

OGCC Operator Number: 97065

Name of Operator: Winslow Resources

Contact Name &amp; Phone

Dave Winslow

Address: 2840 Berry Lane

No: 303-279-1629

City: Golden State: CO Zip: 80401

Fax: 303-279-8430

API Number: 05-121-0607 075-9330

Well Name: Padroni - State Number: 1

Location (QtrQtr, Sec, Twp, Rng, Meridian): W/4 NW/4 Sec 16-9N-52W

County: Logan Federal, Indian or State lease number:

Field Name: Field Number:

☐ Notice of Intent to Abandon☒ Subsequent Report of Abandonment

Background for Intent Only

Reason for abandonment: ☒ Dry ☐ Production Sub-economic ☐ Mechanical Problems ☐ OtherCasing to be pulled: ☒ No ☐ Yes Top of casing cement:Fish in hole: ☒ No ☐ Yes If yes, explain details below:Wellbore has uncemented casing leaks: ☒ No ☐ Yes If yes, explain details below:

Details:

Current and Previously Abandoned Zones

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

Casing History

Casing String	Size	Cement Top	Stage Cement Top
Surface	8-5/8"	0	

Plugging Procedure for Intent and Subsequent Report

1. CIBP #1 Depth \_\_\_\_\_ CIBP #2 Depth \_\_\_\_\_ CIBP #3 Depth \_\_\_\_\_ NOTE: Two (2) sacks cement required on all CIBPs
2. Set 40 SKS cmt from 4630 ft. to 4530 ft. in ☐ Casing ☒ Open Hole ☐ Annulus
3. Set \_\_\_\_\_ SKS cmt from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. in ☐ Casing ☐ Open Hole ☐ Annulus
4. Set \_\_\_\_\_ SKS cmt from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. in ☐ Casing ☐ Open Hole ☐ Annulus
5. Set \_\_\_\_\_ SKS cmt from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. in ☐ Casing ☐ Open Hole ☐ Annulus
6. Set \_\_\_\_\_ SKS cmt from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. in ☐ Casing ☐ Open Hole ☐ Annulus
7. Perforate and squeeze @ \_\_\_\_\_ ft. with \_\_\_\_\_ SKS Leave at least 100 ft. in casing
8. Perforate and squeeze @ \_\_\_\_\_ ft. with \_\_\_\_\_ SKS Leave at least 100 ft. in casing
9. Perforate and squeeze @ \_\_\_\_\_ ft. with \_\_\_\_\_ SKS Leave at least 100 ft. in casing
10. Set 50 SKS 1/2 in 1/2 out surface casing from 460 ft. to 420 ft.
11. Set 10 SKS @ surface
- Cut 4 feet below ground level, weld on plate
- Set \_\_\_\_\_ SKS in rate hole Dry-Hole Marker ☐ No ☐ Yes
- Set \_\_\_\_\_ SKS in mouse hole

Additional Plugging Information for Subsequent Report Only

Casing recovered: \_\_\_\_\_ ft. of \_\_\_\_\_ in casing

Plugging date: 2/3/02

\*Wireline contractor: \_\_\_\_\_

\*Cementing contractor: CementusType of cement and additives used: NOAT

\*Attach job summaries.

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

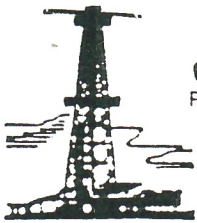
Print Name DG WinslowSigned DG WinslowTitle: PresidentDate: 8-1-02OGCC Approved: Col N. Mattee

Title:

Date: 9/17/02

CONDITIONS OF APPROVAL, IF ANY:



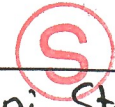


FEB 13 2002

## CEMENTER'S WELL SERVICE, INC.

P.O. BOX 336220 • GREELEY, CO 80633 • (970) 353-7299 • FAX (970) 353-7712

OUR INVOICE No 182187



Date <u>2-3-2002</u>	Well Owner <u>Winslow Res Inc</u>	Well No. <u>#1</u>	Lease <u>Padroni State</u>
County <u>Logan</u>	State <u>Colorado</u>	Field	
Charge to <u>Caza Drilling Inc</u>	Charge Code		
Address <u>Rig #32</u>	For Office Use Only		
City, State <u>Denver Colorado</u>			
Pump Truck No. <u>1208</u>	Code	Bulk Truck No. <u>1214</u>	Code
Type of Job	Depth	Ft.	To
Surface	Bottom of Surface	Ft.	To
Plug <u>4 1/2</u>	Plug Landed @	Ft.	Time On <u>11:00</u>
Production	Pipe Landed @	Ft.	Time Off <u>17:00</u>

Reference No.	Description	Qty.	Meas.	Unit Price	Amount
	Pump Truck Charge				
	Cement Neat ✓	110	SX		4850.00
	Poz. Mix				
	Calcium Chloride				
	Gel % Flo-Cele #Per Sack				
	Handling Charge <u>32-84-7000</u>				
	Hauling Charge				
	Additional Cement				
#1	40 sks plug Set at 4630 plug down 1130				
#2	50 sks plug Set at 442 1/2 + 1/2 out of Surface				
#3	10 sks plug Top Cut + Cap				
	5 sks Rat Hole				
	5 sks Mouse Hole				
	mixing rate 4 Bpm Displacement Rate 6 Bpm				
	Slurry Vol 1.18 Cu ft per SK 15.2 ppg 6.5% cement per bbl				

Remarks:	Tax Reference Code	Sub Total	4850.00
	State <u>CO.2.9 %</u>	Tax	140.65
	Disc.	Total	4990.65

Truck No.	Code	State Mileage	Nebraska	Colorado	Wyoming	Other	Total Mileage
1208		Pump Truck		100			
1214		Bulk Truck		100			

We do not assume any responsibility for any damage or conditions resulting from our services. All pricing is subject to review and revision.

Delivered By Bart Doug OregReceived By Jim Munk  
Customer or His Agent



JUL-31-02 07:34 From:

T-830 P.02/04 Job-322

FEB 13 2002

OUR INVOICE No 182187



# CEMENTER'S WELL SERVICE, INC.

P.O. BOX 335220 • GREELEY, CO 80633 • (970) 353-7299 • FAX (970) 353-7712



Date <u>2-3-2002</u>	Well Owner <u>Winslow Res Inc</u>	Well No. <u>#1</u>	Lease <u>Ridroni Stati</u>
County <u>Logan</u>	State <u>Colorado</u>	Field	
Charge to <u>Caza Drilling Inc</u>	Charge Code		
Address <u>Rig #32</u>	For Office Use Only		
City, State <u>Denver Colorado</u>			
Pump Truck No. <u>1208</u>	Code	Bulk Truck No. <u>1214</u>	Code
Type of Job		Depth	Ft.
Surface		Bottom of Surface	Ft.
Plug <u>4 1/2</u>		Plug Landed @	Ft.
Production		Pipe Landed @	Ft.
		Time On <u>1100</u>	
		Time Off <u>1700</u>	

Reference No.	Description	Qty.	Meas.	Unit Price	Amount
	Pump Truck Charge				
	Cement Near ✓	110	SX		4850.00
	Poz. Mix				
	Calcium Chloride				
	Gel % Flo-Cele #Per Sack				
	Handling Charge <u>32-84 = 700.00</u>				
	Hauling Charge				
	Additional Cement				
#1	40 sks plug Set at 4630 plug down				1130
#2	50 sks plug Set at 447 1/2 + 1/2 out of Surface				
#3	10 sks plug Top Cut + Cap				
	5 sks 12" Hole				
	5 sks 10" Hole				
	mixing rate 4 Bpm Displacement Rate 6 Bpm				
	Slurry Vol 1.18 cu ft per sk 15.2 ppg 6.5x crk per bbl				

Remarks:			Tax Reference Code	Sub Total	4850.00		
			State CO.2.9 %	Tax	140.65		
			Disc.	Total	4990.65		
Truck No.	Code	State Mileage	Nebraska	Colorado	Wyoming	Other	Total Mileage
1208		Pump Truck		100			
1214		Bulk Truck		100			



**Fax Transmittal**

Kerr-McGee  
Rocky Mountain Corporation  
3939 Carson Avenue  
Evans, CO 80620  
970-330-0614 (main)  
970-330-0431 (fax)

**To:** Dave Shelton**Company:** OGCC**Fax #:** OGCC**Phone #:** \_\_\_\_\_**From:** Elaine Whick**Company:** Kerr-McGee Rocky Mtn Corp**Date:** 8-1-02**Re:** Permit copy**Number of pages including cover sheet** 2**Message:****Confidentiality Note:**

The documents accompanying this facsimile transmission contain information from Kerr-McGee Corporation, which is confidential or privileged. The information is intended to be for the use of the individual or entity named on this transmission sheet. If you are not the intended recipient, be aware that disclosure, copying, distribution or use of the contents of this faxed information is prohibited. If you have received this facsimile in error, please notify us by telephone at 970/330-0614 immediately so that we can arrange for the retrieval of the original documents at no cost to you. Thank you.



Operator: Windsor Res. Inc  
Address: \_\_\_\_\_

2890 Berry Lane  
Golden CO 80401

State of Colorado  
OIL AND GAS CONSERVATION COMMISSION  
Department of Natural Resources  
1120 Lincoln Street, Suite 801  
Denver, Colorado 80203  
Tel: 303.894.2100  
Fax: 303.894.2109

TODAY'S DATE: 01/20/02

RE: Well Name: Pedroni-1 Talc

Location: 16-7N-32W

API#: 05 - 13 - 9332

**Dear Operator of Record:**

Upon review of subject well file(s) we still require the following information:

**FORM 4    SUNDRY NOTICE - Rule 307.**

\_\_\_\_ Change of Location (confirm both new AND old footages from section line and provide new survey plat). Rule 303f and COGCC policy considers a change of  $\frac{1}{4}$   $\frac{1}{4}$  to be substantive, requiring a new Permit.

\_\_\_\_Abandoned Location (indicate well never drilled and surface restored). Rule 307.

\_\_\_\_\_ Status Update REQUIRED EVERY 12 MONTHS on all Shut-In, Temporarily Abandoned and Waiting on Completion wells. Rule 319b.

**\_\_\_\_Date Shut-In or Production Resumed. Rule 319.**

\_\_\_\_Change of Well Name/Number

**FORM 5/5A COMPLETION REPORTS - Rule 308. Form 5 Required on ALL wells drilled.**

       Complete Form 5 (Log tops must be on form, not attached)

\_\_\_\_ Complete Form 5A or item(s) #: \_\_\_\_, \_\_\_\_, \_\_\_\_, \_\_\_\_, \_\_\_\_, \_\_\_\_.

\_\_\_\_ Complete the following item(s) on Form 5: #\_\_\_\_, #\_\_\_\_, #\_\_\_\_, #\_\_\_\_.

\_\_\_\_ Recompletion or Commingled Data on Form 5A for \_\_\_\_\_ formation. Submit information on the formations whose status changed only.

**FORM 6 WELL ABANDONMENT REPORT** - Rule 311. Required for filing of intent or subsequent report of abandonment.

Final Plugging and Abandonment, attach verification of all plugs set.

\_\_\_\_ Plug Verification for: \_\_\_\_\_ All plugs or \_\_\_\_\_

**FORM 10 CERTIFICATION OF CLEARANCE AND/OR CHANGE OF OPERATOR - Rule 312.**

**All blanks must be completely filled in regardless of reason this form is submitted.**

\_\_\_\_ Complete form (due within 30 days after initial sale of gas or oil production).

\_\_\_\_CHANGE OF OPERATOR (must be signed by new operator)

\_\_\_ Oil Transporter/purchaser change

\_\_\_\_ Gas Gatherer/purchase change

\_\_\_\_New Form for Recompleted or Commingled Formation\_\_\_\_

**FORM 21 MECHANICAL INTEGRITY TEST - Rule 316b.**

\_\_\_\_A Mechanical Integrity Test is required within two (2) years of Shut-In Date. Please contact Area Engineer, \_\_\_\_\_, at phone # \_\_\_\_\_, to schedule MIT for this well.

## MISCELLANEOUS

\_\_\_\_ One complete wet of Wireline electric logs (or \_\_\_\_\_ log only). Rule 308.

\_\_\_\_ Other: \_\_\_\_\_

**PERMIT EXPIRED ON** \_\_\_\_\_. Submit the following applicable data:

- (1) If Total Depth reached: Form 5, Form 5A and 10 (if producing) and one set of all logs run
- (2) If plugged: Form 6, Form 5, one set of all logs run and Plug Verification (Third Party Job Log)
- (3) If never drilled: Form 4 stating "Abandoned Location and Surface Restored"

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7/1/2018

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If you have questions regarding this notice contact: Bill McLaw Ext. 119  
(please print)

PLEASE RETURN THIS NOTICE WITH YOUR RESPONSE BY 7/26/02

For COGCC Use Only: DATE RESOLVED: \_\_\_\_\_ By: \_\_\_\_\_

Rev. 8/2000