



00500192

TIGHT

OGCC FORM 4
Rev. 4/89STATE OF COLORADO
OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES

MAY 17 1996

SUBMIT ORIGINAL AND 1 COPY

FOR OFFICE USE ONLY			
ET	FE	UC	SE

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

5 FEDERAL INDIAN OR STATE LEASE NO.

Fee

☐ OIL WELL ☐ GAS WELL ☐ COALBED METHANE ☐ INJECTION WELL ☒ OTHER = D&A

6 PERMIT NO.

96 074

2 NAME OF OPERATOR

Amoco Production Company

7 API NO.

05 017 7510

3 ADDRESS OF OPERATOR

PO Box 800 Room 924

8 WELL NAME

Dick's Brown

CITY STATE ZIP CODE
Denver CO 80201

9 WELL NUMBER

1-26

4 LOCATION OF WELL (Report location clearly and in accordance with any State requirements
See also space 17 below.)
At surface

850' FSL & 2100' FEL (NW SW SE)

10 FIELD OR WILDCAT

Wildcat

At proposed prod. zone Same

12 COUNTY

Cheyenne

11 QTR. QTR. SEC., T.R. AND MERIDIAN

SW SE Sec. 26-T15S-R43W
6th P.M.

Check Appropriate Box To Indicate Nature of Notice, Report or Notification

13A. NOTICE OF INTENTION TO:

- ☐ PLUG AND ABANDON
☐ MULTIPLE COMPLETION
 COMINGLED ZONES
 FRACTURE TREAT
☐ REPAIR WELL
☐ OTHER _____

13B. SUBSEQUENT REPORT OF:

- ☒ FINAL PLUG AND ABANDONMENT
 (SUBMIT 3RD PARTY CEMENT VERIFICATION
 AND JOB LOG)
☐ ABANDONED LOCATION (WELL NEVER DRILLED -
 SITE MUST BE RESTORED WITHIN 6 MONTHS)
☐ REPAIRED WELL
☐ OTHER _____

*Use Form 5 - Well Completion or Recompletion Report and Log
for subsequent reports of Multiple/Comingled Completions
and Recompletions

13C. NOTIFICATION OF:

- ☐ SHUT-IN TEMPORARILY ABANDONED
 (DATE _____)
 (REQUIRED EVERY 6 MONTHS)
☐ PRODUCTION RESUMED
 (DATE _____)
☐ LOCATION CHANGE (SUBMIT NEW PLAT)
☐ WELL NAME CHANGE
☐ OTHER _____

14. DESCRIBE PROPOSED OR COMPLETED OPERATIONS ON THIS FORM (Clearly state all pertinent details, and give pertinent dates, including
estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and
zones pertinent

15. DATE OF WORK April 22, 1996

Obtained verbal plugging orders from Bob Van Sickle on 4-22-96. Well was plugged using 220 sacks of Premium cement (Class H) with 2%CC as follows: Plug no. 1 at 4352' w/40 sx; Plug No. 2 at 2334' w/40 sx; Plug No. 3 at 1803' w/ 40 sx; Plug No. 4 at 1459' w/40 sx; Plug No. 5 at 619' w/ 40 sx; surface plug at 60' w/10 sx; Rathole w/5 sx; Mousehole w/5 sx. Surface will be retsored by October 22, 1996.

16. I hereby certify that the foregoing is true and correct

SIGNED Susan R. Potts TELEPHONE NO. 303-830-5323NAME (PRINT) Susan R. Potts TITLE Senior Staff Assistant DATE May 16, 1996

(This space for Federal or State office use)

APPROVED [Signature] TITLE _____ DATE 5/23/96

CONDITIONS OF APPROVAL IF ANY:

TIGHT

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Rev. 1/89STATE OF COLORADO
OIL AND GAS CONSERVATION COMMISSION
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SW SE Sec. 26-T15S-R43W
6th P.M.
☐ OIL WELL ☐ GAS WELL ☐ COALBED METHANE ☐ INJECTION WELL ☒ OTHER - D&A

1 NAME OF OPERATOR

Amoco Production Company

ADDRESS OF OPERATOR

PO Box 800 Room 924

CITY

Denver

STATE

CO

ZIP CODE

80201

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See also space 17 below.)

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SIGNED Susan R. Potts

TELEPHONE NO. 303-830-5323

NAME (PRINT) Susan R. Potts

TITLE Senior Staff Assistant

DATE May 16, 1996

(This space for Federal or State office use)

APPROVED [Signature]
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

5/23/96



HALLIBURTON

JOB
SUMMARYHALLIBURTON
DIVISIONHALLIBURTON
LOCATIONMidcontinent
Liberal KSBILLED ON
TICKET NO. 921489

WELL DATA

FIELD _____ SEC. 26 TWP. 15 RNG. 43W COUNTY Cheyenne STATE Colo

FORMATION NAME _____ TYPE _____

FORMATION THICKNESS _____ FROM _____ TO _____

INITIAL PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD

PRESENT PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD

COMPLETION DATE _____ MUD TYPE _____ MUD WT. _____

PACKER TYPE _____ SET AT _____

BOTTOM HOLE TEMP. _____ PRESSURE _____

MISC. DATA _____ TOTAL DEPTH _____

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING	U	28	8 5/8	KB	605	
LINER						
TUBING						
OPEN HOLE			12 1/4	61	605	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE 4-8-96	DATE 4-8-96	DATE 4-8-96	DATE 1-8-96
TIME 1100	TIME 1657	TIME 2246	TIME 2343

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
Ron Crist	38242	Liberal
D7653		
Chris Cornelison	62947	"
G2569	7131	
Calvin Lay	50737	Hugoton
D9259	75817	

TYPE AND SIZE	QTY.	MAKE
8 5/8		
FLOAT COLLAR	1	
FLOAT SHOE		
GUIDE SHOE		
CENTRALIZERS	3	
BOTTOM PLUG		
TOP PLUG	1	
HEAD	1	
PACKER	1	
OTHER	1	

MATERIALS

TREAT. FLUID _____ DENSITY _____ LB./GAL. °API

DISPL. FLUID _____ DENSITY _____ LB./GAL. °API

PROP. TYPE _____ SIZE _____ LB.

PROP. TYPE _____ SIZE _____ LB.

ACID TYPE _____ GAL. _____ %

ACID TYPE _____ GAL. _____ %

ACID TYPE _____ GAL. _____ %

SURFACTANT TYPE _____ GAL. _____ IN

NE AGENT TYPE _____ GAL. _____ IN

FLUID LOSS ADD. TYPE _____ GAL.-LB. _____ IN

GELLING AGENT TYPE _____ GAL.-LB. _____ IN

FRIC. RED. AGENT TYPE _____ GAL.-LB. _____ IN

BREAKER TYPE _____ GAL.-LB. _____ IN

BLOCKING AGENT TYPE _____ GAL.-LB. _____

PERFPAC BALLS TYPE _____ QTY. _____

OTHER _____

OTHER _____

DEPARTMENT 5001

DESCRIPTION OF JOB 010

JOB DONE THRU: TUBING ☐ CASING ☒ ANNULUS ☐ TBG./ANN. ☐

CUSTOMER
REPRESENTATIVE X

HALLIBURTON
OPERATOR

Ron Crist

COPIES
REQUESTED

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
175		"C" LTWT		B	1/4% Floccle, 2% CC	2.06	12.3
150		"C"		B	1/4% Floccle, 2% CC	1.32	14.8
50		"C"		B	1/4% Floccle, 2% CC	1.32	14.8

PRESSURES IN PSI

SUMMARY

VOLUMES

CIRCULATING _____ DISPLACEMENT _____ PRESLUSH: BBL.-GAL. _____ TYPE _____

BREAKDOWN _____ MAXIMUM _____ LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____

AVERAGE _____ FRACTURE GRADIENT _____ TREATMENT: BBL.-GAL. _____ DISPL: BBL.-GAL. 35.5

SHUT-IN: INSTANT _____ 5-MIN. _____ 15-MIN. _____ CEMENT SLURRY: BBL.-GAL. 64 CC 25TC

HYDRAULIC HORSEPOWER _____ TOTAL VOLUME: BBL.-GAL. _____

ORDERED _____ AVAILABLE _____ USED _____

AVERAGE RATES IN BPM _____

TREATING _____ DISPL. _____ OVERALL _____

CEMENT LEFT IN PIPE _____

FEET 35.06 REASON Shoe Joint

REMARKS

Circulated 4 BBLs To PIT

CUSTOMER

CUSTOMER

LEASE

WELL NO.

JOB TYPE

DATE

WELL DATA

FIELD _____ SEC. 26 TWP. 15 S. RNG. 43 W. COUNTY Caddo STATE CO

FORMATION NAME _____ TYPE _____

FORMATION THICKNESS _____ FROM _____ TO _____

INITIAL PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD

PRESENT PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD

COMPLETION DATE _____ MUD TYPE _____ MUD WT. _____

PACKER TYPE _____ SET AT _____

BOTTOM HOLE TEMP. _____ PRESSURE _____

MISC. DATA _____ TOTAL DEPTH _____

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING						
LINER						
TUBING	DP	10.6	4 1/2	11.8	4352	
OPEN HOLE			7 7/8	6.6		SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

TOOLS AND ACCESSORIES		JOB DATA	
TYPE AND SIZE	QTY.	MAKE	
FLOAT COLLAR			
FLOAT SHOE			
GUIDE SHOE			
CENTRALIZERS			
BOTTOM PLUG			
TOP PLUG			
HEAD			
PACKER			
OTHER			

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE _____	DATE 9-22-96	DATE 4-12-96	DATE 4-12-96
TIME _____	TIME 9:00	TIME 14:15	TIME 19:40

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
R. Elwood	D 4360	420041 PU LEGAL K5
Richard Arntson	52932	
E. 1054	75051 (P)	
C. LAY	50737	
D 9259	2649 (R)	Hughes H

MATERIALS

TREAT. FLUID _____ DENSITY _____ LB./GAL. °API

DISPL. FLUID _____ DENSITY _____ LB./GAL. °API

PROP. TYPE _____ SIZE _____ LB.

PROP. TYPE _____ SIZE _____ LB.

ACID TYPE _____ GAL. _____ %

ACID TYPE _____ GAL. _____ %

ACID TYPE _____ GAL. _____ %

SURFACTANT TYPE _____ GAL. _____ IN

NE AGENT TYPE _____ GAL. _____ IN

FLUID LOSS ADD. TYPE _____ GAL.-LB. _____ IN

GELLING AGENT TYPE _____ GAL.-LB. _____ IN

FRIC. RED. AGENT TYPE _____ GAL.-LB. _____ IN

BREAKER TYPE _____ GAL.-LB. _____ IN

BLOCKING AGENT TYPE _____ GAL.-LB. _____

PERFPAC BALLS TYPE _____ QTY. _____

OTHER _____

OTHER _____

DEPARTMENT 5041 CONT

DESCRIPTION OF JOB PTA

JOB DONE THRU: TUBING ☒ CASING ☐ ANNULUS ☐ TBG./ANN. ☐

CUSTOMER REPRESENTATIVE X Ron Pollard

HALLIBURTON OPERATOR Robert Elwood

COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	220	H	H	B	2% C.C.	1.22	13.5

PRESSURES IN PSI

SUMMARY

VOLUMES

CIRCULATING _____ DISPLACEMENT _____

BREAKDOWN _____ MAXIMUM _____

AVERAGE _____ FRACTURE GRADIENT _____

SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN _____

HYDRAULIC HORSEPOWER

ORDERED _____ AVAILABLE _____ USED _____

AVERAGE RATES IN BPM

TREATING _____ DISPL. _____ OVERALL _____

CEMENT LEFT IN PIPE

FEET _____ REASON _____

PRESLUSH: BBL.-GAL. _____ TYPE _____

LOAD & BKDN: BBL.-GAL. 5 J PAD: BBL.-GAL. L

TREATMENT: BBL.-GAL. E O DISPL: BBL.-GAL. O

CEMENT SLURRY: BBL.-GAL. E O

TOTAL VOLUME: BBL.-GAL. _____

REMARKS

ATTN: Susan Potts



HALLIBURTON

JOB LOG HAL 2013-C

CUSTOMER		WELL NO		LEASE		JOB TYPE		DATE	PAGE NO.
Amoco Production		1-26		Dickinson		PTN		4-22-96	1
CHART NO.		TIME	RATE (GPM)	VOLUME (BBL) (GAL)	PUMPS AT C	PRESSURE (PSI)		TICKET NO.	
						TUBING	CASING	920049	
DESCRIPTION OF OPERATION AND MATERIALS									
		02:00						CUT-2 GET	
		02:00						12 TUBING END CATCH COLUMBIA WELLS CO.	
		08:20						CUT-2 GET	
		14:05						START ELECTRIC	
		14:15						SET 1ST Plug 4252 40 300	
		14:18	2	10				HOOK TO HALLIBURTON	
		14:23	4.3	2.69			400	START H ₂ O AHEAD	
		14:25	3.5	3.5			350	START CMT @ 15.5 #/gal	
		14:26	7	56.13			500	START H ₂ O BEHIND	
		14:34					500	START PHO Displacement Bottom of Plug 4252	
		14:35					WAC	SHUT DOWN TOP OF Plug 4252	
							0	LAY DOWN D.P.	
		15:50						2nd Plug 40 500 @ 2334	
		15:52	2.3	10				HOOK TO HALLIBURTON	
		15:55	4.3	8.69			250	START H ₂ O AHEAD	
		15:57	3.5	3.5			400	START CMT @ 15.5 #/gal	
		15:58	5.5	22.4			300	START H ₂ O BEHIND Bottom of Plug 2334	
		16:03					180	START PHO Displacement Top of Plug 2334	
		16:05					WAC	SHUT DOWN	
							0	LAY DOWN D.P.	
		16:23						3rd Plug 40 500 @ 1903	
		16:25	3.3	10				HOOK TO HALLIBURTON	
		16:28	2.9	8.69			450	START H ₂ O AHEAD	
		16:31	3.5	3.5			200	START CMT @ 15.5 #/gal Bottom of Plug 1903	
		16:38	4.0	19.8			200	START H ₂ O BEHIND Top of Plug 1903	
		16:36					200	START PHO Displacement	
		16:37					WAC	SHUT DOWN	
							0	PULL LAY DOWN DOWN P.D.	



HAL-1906-N

CITY, STATE, ZIP CODE

920045 -

PAGE 1 OF 2

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES					The customer hereby acknowledges receipt of the materials and services listed on this ticket.	
CUSTOMER OR CUSTOMER'S AGENT (PLEASE PRINT)	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE)	HALLIBURTON OPERATOR/ENGINEER	EMP #	HALLIBURTON APPROVAL		
Bob Brown	X	Bob Brown	2926			

HALLIBURTON

HALLIBURTON ENERGY SERVICES

TICKET CONTINUATION

CUSTOMER COPY

TICKET

No. 920045

FORM 1911 R-10

CUSTOMER

CUSTOMER
Amoco Petroleum

WELL	
------	--

WELL	DATE
1-26 Dick's Branch	4-22-96

DATE

4-22-96

PAGE

OF

1

[illegible]

No. B 341639

CONTINUATION TOTAL

4717-8



CUSTOMER COPY

TICKET

No. 921489

FORM 1911 R-10

No. B 341576

CONTINUATION TOTAL

6214.50