

FORM
6Rev
11/20

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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Document Number:

402542390

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: 83130

Contact Name: Shawn Reed

Name of Operator: STRACHAN EXPLORATION INC

Phone: (303) 5626530

Address: 383 INVERNESS PKWY, STE 360

Fax: (303) 7998975

City: ENGLEWOOD State: CO Zip: 80112

Email: shawn@strachanexploration.com

For "Intent" 24 hour notice required,

Name: Welsh, Brian

Tel: (719) 325-6919

COGCC contact:

Email: brian.welsh@state.co.us

Type of Well Abandonment Report: ☒ Notice of Intent to Abandon ☐ Subsequent Report of Abandonment

API Number 05-011-06060-00

Well Name: SNIFF

Well Number: E-1

Location: QtrQtr: CNW Section: 15 Township: 23S Range: 48W Meridian: 6

County: BENT

Federal, Indian or State Lease Number:

Field Name: WAGON TRAIL

Field Number: 90475

Only Complete the Following Background Information for Intent to Abandon

Latitude: 38.052036

Longitude: -102.792035

GPS Data: GPS Quality Value: 5.0 Type of GPS Quality Value: Date of Measurement: 03/27/2010

Reason for Abandonment: ☐ Dry ☒ Production Sub-economic ☐ Mechanical Problems☐ OtherCasing to be pulled: ☐ Yes ☒ No Estimated Depth: 4718Fish in Hole: ☐ Yes ☒ No If yes, explain details belowWellbore 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 |
|-----------|-----------|-----------|----------------|---------------------|------------|
| MORROW | 4538 | 4549 | | B PLUG CEMENT TOP | 4500 |

Total: 1 zone(s)

Casing History

| Casing Type | Size of Hole | Size of Casing | Grade | Wt/Ft | Csg/Liner Top | Setting Depth | Sacks Cmt | Cmt Btm | Cmt Top | Status |
|-------------|--------------|----------------|-------|-------|---------------|---------------|-----------|---------|---------|--------|
| SURF | 12+1/4 | 8+5/8 | J-55 | 24 | 0 | 334 | 150 | 334 | 0 | CALC |
| S.C. 1.1 | 7+7/8 | 5+1/2 | J-55 | 15.5 | 0 | 4718 | 215 | 4718 | 3500 | CBL |
| S.C. 2.1 | 7+7/8 | 5+1/2 | J-55 | 15.5 | 0 | 4718 | 100 | 1700 | 1100 | CALC |

Subsurface hazards include, but are not limited to, the following: overpressured zones, underpressured zones, major geologic faults, salt sections, H2S at concentrations greater than or equal to 100 ppm.

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 4500 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 30 sks cmt from 2735 ft. to 3000 ft. Plug Type: CASING Plug Tagged: ☐
Set 15 sks cmt from 1750 ft. to 1618 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 40 sacks half in. half out surface casing from 385 ft. to 285 ft. Plug Tagged: ☐

Set 30 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

Surface Plug Setting Date: _____ Cut and Cap Date: _____ Number of Days from Setting Surface Plug to Capping or Sealing the Well: _____

*Wireline Contractor: _____

*Cementing Contractor: _____

Type of Cement and Additives Used: _____

Flowline/Pipeline has been abandoned per Rule 1105 ☐ Yes ☐ No

Technical Detail/Comments:

We have made a number of efforts to solve a paraffin issue to allow the well to be placed back on production. The issues continue and the best recourse is to plug the well. We have reviewed the logs for potential water sources w none found that are not already isolated by primary cement jobs or the squeeze performed at 2795' in August. We are currently ON LOCATION w the rig. Plugging ops would likely proceed as of Decemeber 1. Thanks for your immediate attention.

SDR
303-562-6530

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

Signed: _____

Print Name: Shawn D Reed

Title: Consulting Engineer

Date: _____

Email: shawn@strachanexploration.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

| | |
|-----------|-----------------------------|
| 402542501 | PROPOSED PLUGGING PROCEDURE |
|-----------|-----------------------------|

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

| | | |
|--|--|------------------------|
| | | Stamp Upon Approval |
|--|--|------------------------|

Total: 0 comment(s)