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Replug By Other Operator
 Document Number:
 402673666
 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: Kapri McMillan
 Name of Operator: GREAT WESTERN OPERATING COMPANY LLC Phone: (970) 364-2826
 Address: 1001 17TH STREET #2000 Fax: _____
 City: DENVER State: CO Zip: 80202 Email: kmcmillan@gwp.com

For "Intent" 24 hour notice required, Name: Silver, Randy Tel: (720) 827-6688
COGCC contact: Email: randy.silver@state.co.us

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

API Number 05-001-07002-00
 Well Name: SUPERS Well Number: 1
 Location: QtrQtr: SWNW Section: 32 Township: 1S Range: 66W Meridian: 6
 County: ADAMS Federal, Indian or State Lease Number: _____
 Field Name: BUGLE Field Number: 7800

Only Complete the Following Background Information for Intent to Abandon

Latitude: 39.923420 Longitude: -104.806629
 GPS Data: GPS Quality Value: _____ Type of GPS Quality Value: _____ Date of Measurement: _____
 Reason for Abandonment: Dry Production Sub-economic Mechanical Problems
 Other Off set mitigation for the Edmundson Pad
 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
D SAND	8164	8170	01/23/1996	CEMENT	8164

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	NA	24	0	151	170	151	0	
1ST	7+7/8	4+1/2	NA	11.6	0	8285	300	8285	6624	CALC
				Stage Tool		1286	250	1286	336	CALC

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 8100 with 25 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 25 sks cmt from 7400 ft. to 6964 ft. Plug Type: CASING Plug Tagged:
Set 5 sks cmt from 4900 ft. to 4793 ft. Plug Type: CASING Plug Tagged:
Set 5 sks cmt from 2300 ft. to 2193 ft. Plug Type: CASING Plug Tagged:
Set 79 sks cmt from 1400 ft. to 350 ft. Plug Type: CASING Plug Tagged:
Set 23 sks cmt from 300 ft. to 0 ft. Plug Type: CASING Plug Tagged:

Perforate and squeeze at 5000 ft. with 30 sacks. Leave at least 100 ft. in casing 4900 CICR Depth

Perforate and squeeze at 2400 ft. with 30 sacks. Leave at least 100 ft. in casing 2300 CICR Depth

Perforate and squeeze at 300 ft. with 62 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

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:

Procedure:

- 1 Contact COGCC
- 2 Locate & attach wellhead
- 3 MIRU
- 4 NUBOP
- 5 PU RIH w/ bladed junk mill and workstring
- 6 Mill out cement at surface to ~132' and from ~1036' - 1300' and from ~5925'-6650'
- 7 Check pressures after plug at 6650' & if well is on vacuum, assume there is no cement plug below
- 8 RIH and tag plug (if there).
- 9 Set CIBP on top of tag or at 8100' if no tag.
- 10 Roll hole clean
- 11 TOOH stand back tubing
- 12 RIH w/ WL and run CBL, send results to engineer to verify next steps
- 13 RIH w/ tubing and pump 25 sx Thermal 35 on CIBP at 8100', ETOC @ 7664'
- 14 PU to 7400', pump 25 sx Thermal 35, ETOC @ 6964'
- 15 TOOH, LD to ~5000', stand back remaining
- 16 RIH w/ WL and shoot holes at 5000' & 4800'
- 17 RIH and set CICR @ 4900'
- 18 Squeeze 30 sx thru CICR, leave additional 5 sx on top, ETOC 4793'
- 19 Roll hole clean
- 20 RIH w/ WL and shoot holes at 2400' & 2200'
- 21 RIH and set CICR @ 2300'
- 22 Squeeze 30 sx thru CICR, leave additional 5 sx on top, ETOC 2193'
- 23 Roll hole clean
- 24 Verify no migration
- 25 PU to 1400'
- 26 Pump 79 sx Class G + 2%CC from 1400' to approx 350'
- 27 Shoot holes at 300'
- 28 Circulate 62 sx Class G + 2%CC up annulus to surface, fill casing with 23 sx Class G + 2%CC
- 29 Tag plug and top off as needed
- 30 RDMO
- 31 Record cut & cap date in OpenWells
- 32 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: SR Regulatory Analyst Date: _____ Email: rkendrick@gwp.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 List

Att Doc Num	Name
402673719	LOCATION PHOTO
402673722	SURFACE OWNER CONSENT
402673724	WELLBORE DIAGRAM
402673725	WELLBORE DIAGRAM

Total Attach: 4 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)