

FORM
6Rev
11/20

State of Colorado Oil and Gas Conservation Commission

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Document Number:

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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: 81480

Contact Name: Kathleen Spring

Name of Operator: THOMAS L SPRING LLC

Phone: (303) 7711889

Address: 7400 E ORCHARD RD STE 106-S

Fax:

City: GREENWOOD State: CO Zip: 80111

Email: kathleenspring3@gmail.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 05-061-06749-00

Well Name: STATE BOCK

Well Number: 2

Location: QtrQtr: NESE Section: 31 Township: 20S Range: 48W Meridian: 6

County: KIOWA

Federal, Indian or State Lease Number:

Field Name: MCCLAVE

Field Number: 53600

Only Complete the Following Background Information for Intent to Abandon

Latitude: 38.272560

Longitude: -102.823560

GPS Data: GPS Quality Value: 2.1 Type of GPS Quality Value: PDOP Date of Measurement: 07/08/2012

Reason for Abandonment: ☐ Dry ☒ Production Sub-economic ☐ Mechanical Problems☐ OtherCasing to be pulled: ☐ Yes ☒ No Estimated Depth:Fish 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	4804	4815			

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	J55	24		322	200	322	0	VISU
1ST	7+7/8	4+1/2	J55	10.5		4805	285	4805	3290	CBL
				Stage Tool		3005	440	3010	1070	CBL

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 4690 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 <u>10</u> sks cmt from <u>3050</u> ft. to <u>2950</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input type="checkbox"/>
Set <u>10</u> sks cmt from <u>1200</u> ft. to <u>1100</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input type="checkbox"/>
Set <u>10</u> sks cmt from <u>860</u> ft. to <u>760</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input checked="" type="checkbox"/>
Set <u>10</u> sks cmt from <u>600</u> ft. to <u>500</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input checked="" type="checkbox"/>
Set <u>10</u> sks cmt from <u>372</u> ft. to <u>272</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input checked="" type="checkbox"/>

Perforate and squeeze at 860 ft. with 30 sacks. Leave at least 100 ft. in casing _____ CICR Depth

Perforate and squeeze at 600 ft. with 30 sacks. Leave at least 100 ft. in casing _____ CICR Depth

Perforate and squeeze at 372 ft. with 40 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 15 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:

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

Signed: _____ Print Name: Kathleen Spring

Title: Manager Date: _____ Email: kathleenspring3@gmail.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**

0 COA	
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Attachment List

Att Doc Num

Name

403318572	WELLBORE DIAGRAM
403318576	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)