



State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203: (303) 894-2100 Fax: 894-2109

WELL ABANDONMENT REPORT

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

OGCC Operator Number:

Name of Operator: Trinity Energy Corp

Address:

City: _____ State: _____ Zip: _____

API Number: 05-121-05439

OGCC Lease No: _____

Well Name: Westfork 17

Number: _____

Location (QtrQtr, Sec, Twp, Rng, Meridian): NWNW 30 35 55WCounty: Washington

Federal, Indian or State lease number: _____

Field Name: Westfork

Field Number: _____

Contact Name & Phone Number

Kurt DodgeNo: 970-539-4486Fax: 970-857-1286Other wells this lease? ☐ Y ☒ N

FOR OGCC USE ONLY

ET

OE

PR

ES

24 hour notice required, contact:

Ed Binkley
@ 970-842-4465Complete the
Attachment Checklist

	Opr	OGCC
Wellbore Diagram		
Cement Job Summary		
Wireline Job Summary		

☒ Notice of Intent to Abandon☐ Subsequent Report of Abandonment

Only Complete the Following Background Information for Intent to Abandon

Reason for abandonment: ☐ Dry ☒ Production Sub-economic ☐ Mechanical Problems ☐ Other
Casing to be pulled: ☐ No ☒ Yes Top of casing cement: 4252
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
<u>Jsnd</u>	<u>4925-4930</u>		<u>None</u>	

Casing History

Casing Size	Casing Depth	Cement Top	Stage Cement Top
<u>10 3/4</u>	<u>167</u>	<u>surface</u>	
<u>5 1/2</u>	<u>4974</u>	<u>4252</u>	

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 4960 with 2 sks cmt on top. CIBP #2: Depth _____ with _____ sks cmt on top.

NOTE: Two (2) sacks cement required on all CIBPs.

Set _____ sks cmt from _____ ft. to _____ ft. in <input type="checkbox"/> Casing <input type="checkbox"/> Open Hole <input type="checkbox"/> Annulus
Set _____ sks cmt from _____ ft. to _____ ft. in <input type="checkbox"/> Casing <input type="checkbox"/> Open Hole <input type="checkbox"/> Annulus
Set _____ sks cmt from _____ ft. to _____ ft. in <input type="checkbox"/> Casing <input type="checkbox"/> Open Hole <input type="checkbox"/> Annulus
Set _____ sks cmt from _____ ft. to _____ ft. in <input type="checkbox"/> Casing <input type="checkbox"/> Open Hole <input type="checkbox"/> Annulus
Set _____ sks cmt from _____ ft. to _____ ft. in <input type="checkbox"/> Casing <input type="checkbox"/> Open Hole <input type="checkbox"/> Annulus

Perforate and squeeze @ _____ ft. with _____ SKS Leave at least 100 ft. in casing

Perforate and squeeze @ _____ ft. with _____ SKS Leave at least 100 ft. in casing

Perforate and squeeze @ _____ ft. with _____ SKS Leave at least 100 ft. in casing

Set 50 SKS 1/2 in 1/2 out surface casing from 220 ft. to 120 ft.Set 10 SKS @ surface

Cut 4 feet below ground level, weld on plate

Set _____ SKS in rat 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: _____

*Wireline contractor: _____

*Cementing contractor: _____

Type of cement and additives used: _____

*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: Fayed to Kurt Dodge 2/4/99

Signed: _____ Title: _____ Date: _____

OGCC Approved: Col D. Matter Title: Sr. Engineer Date: 2/4/99

CONDITIONS OF APPROVAL, IF ANY:

work
If casing (5 1/2) is not pulled perforate and squeeze 50 sks
@ 220' leave 100' inside casing
Contact Ed Binkley 24 hr prior to commencing