

FORM



6

Rev 11/20

State of Colorado

Energy & Carbon Management Commission

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

DE

ET

OE

ES

Replug By Other Operator

Document Number: 403475991

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: 10633

Contact Name: Adam Conry

Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLC

Phone: (303) 883-3351

Address: 1801 CALIFORNIA STREET #2500

Fax:

City: DENVER State: CO Zip: 80202

Email: aconry@civiresources.com

For "Intent" 24 hour notice required, Name: Tel:

COGCC contact: Email:

Type of Well Abandonment Report:

☐ Notice of Intent to Abandon
 ☒ Subsequent Report of Abandonment

API Number 05-001-06479-00

Well Name: BOX ELDER FARMS CO Well Number: 1

Location: QtrQtr: SWSE Section: 6 Township: 3S Range: 65W Meridian: 6

County: ADAMS Federal, Indian or State Lease Number:

Field Name: SECOND CREEK Field Number: 76900

Only Complete the Following Background Information for Intent to Abandon

Latitude: 39.814538 Longitude: -104.703833

GPS Data: GPS Quality Value: Type of GPS Quality Value: PDOP Date of Measurement: 06/24/2023

Reason for Abandonment:
 ☐ Dry
 ☐ Production Sub-economic
 ☐ Mechanical Problems
 ☐ Other

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

Total: 0 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	271	200	271	0	CALC
OPEN HOLE	7+7/8				271	8526				

Date Run: 8/14/2023 Doc [#403475991] Well Name: BOX ELDER FARMS CO 1

Page 1 of 3

## Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth \_\_\_\_\_ with \_\_\_\_\_ 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 110 sks cmt from 7600 ft. to 7375 ft. Plug Type: OPEN HOLE Plug Tagged: ☐  
Set 50 sks cmt from 3200 ft. to 3100 ft. Plug Type: OPEN HOLE Plug Tagged: ☐  
Set 100 sks cmt from 1800 ft. to 1567 ft. Plug Type: OPEN HOLE Plug Tagged: ☐  
Set 50 sks cmt from 933 ft. to 833 ft. Plug Type: OPEN HOLE 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 400 sacks half in. half out surface casing from 400 ft. to 0 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: 07/05/2023 Cut and Cap Date: 07/15/2023 Number of Days from Setting Surface Plug to Capping or Sealing the Well: 10

\*Wireline Contractor: \_\_\_\_\_

\*Cementing Contractor: Axis Energy Services

Type of Cement and Additives Used: Class G & Thixso

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

Technical Detail/Comments:

Venting health and safety precautions were taken to avoid nuisance and or hazards to the public.

- 1) Form 42 was submitted prior to plugging operations, Form 42 Doc #403438422. Form 42 was submitted prior to MIRU for plugging operations, Form 42 Doc #403438426.
- 2) Prior to placing cement above the base of the Upper Pierre at 3200', operator waited a sufficient amount of time to confirm static conditions. There was no pressure or fluid migration.
- 3) The plug was cemented to surface with 400 sacks of cement from 400' - 0'.
- 4) At least 100' of cement was left in the wellbore for each plug.
- 5) This form 6-SRA addresses all COA's from the Form 6-NOIA.

Attached to this Form:

1. Cement tickets are attached to this form.
2. Operations summary is attached to this form for reference.
3. Final P&A WBD is attached to this form.
4. As-Drilled GPS Data is attached to this form.

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

Signed: \_\_\_\_\_

Print Name: Ashley Noonan

Title: Sr. Regulatory Analyst

Date: \_\_\_\_\_

Email: regulatory@civiresources.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:****COA Type****Description**

0 COA	

**Attachment List****Att Doc Num****Name**

403476024	OPERATIONS SUMMARY
403476025	WELLBORE DIAGRAM
403478843	CEMENT JOB SUMMARY
403479081	OTHER

Total Attach: 4 Files

**General Comments****User Group****Comment****Comment Date**

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

Total: 0 comment(s)