



State of Colorado Conservation Commission

DEPARTMENT OF NATURAL RESOURCES

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 one year after the approval date; after that period a new intent will be required. After the plugging is complete, this form shall again be submitted as a subsequent report of the work as actually completed.

FOR OGCC USE ONLY RECEIVED 00900

OGCC Operator Number: Energy Alliance Company, Contact Name & Phone: Rick Wyghman, Address: PO Box 4461, City: Englewood, State: CO, Zip: 30155, API Number: 05-00962821, Well Name: WECCO ST., Number: 1-16, Location: CNE 16-33S-43W, County: Baca, Federal, Indian or State lease number: [blank], Field Name: [blank], Field Number: [blank]

24 hour notice required, contact @ [blank], Complete the Attachment Checklist, Wellbore Diagram, Cement Job Summary, Wireline Job Summary

Notice of Intent to Abandon Subsequent Report of Abandonment

Background for Intent Only

Reason for abandonment: Dry, Production Sub-economic, Mechanical Problems, Other, Casing to be pulled: No, Yes, Top of casing cement: [blank], Fish in hole: No, Yes, Wellbore has uncemented casing leaks: No, Yes

Current and Previously Abandoned Zones

Table with columns: Formation, Perforations, Date, Method of Isolation, Plug Depth. Handwritten entry: 1684-1691, 7/22/98

Casing History

Table with columns: Casing String, Size, Cement Top, Stage Cement Top. Handwritten entries: Prod 4 1/2 10.56 900, Surf 9 5/8 404

Plugging Procedure for Intent and Subsequent Report

1. CIBP #1 Depth 1650, CIBP #2 Depth [blank], CIBP #3 Depth [blank], Set [blank] SKS cmt from [blank] ft. to [blank] ft. in, Perforate and squeeze @ [blank] ft. with [blank] SKS, Leave at least 100 ft. in casing, Dry-Hole Marker No

Additional Plugging Information for Subsequent Report Only

Casing recovered: [blank] ft. of [blank] in. casing, Plugging date: [blank], Wireline contractor: [blank], Cementing contractor: [blank], Type of cement and additives used: [blank], 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: FRANK HUTTO, Signed: Frank Hutto, Title: Agent, Date: 10/10/97, OGCC Approved: [blank], Title: [blank], Date: 10/10/97

CONDITIONS OF APPROVAL, IF ANY:

PROVIDE 24 HR NOTICE TO BOB VANSICKLE 719-336-2843