

State of Colorado
Oil and Gas Conservation Commission

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



FOR OGCC USE ONLY
RECEIVED
JAN 26 01
COGCC

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: <u>46290</u>	Contact Name and Telephone <u>Kent L. Gilbert</u>	24 hour notice required, contact: <u>Linda Pavelka</u> Tel: <u>(303) 732-9414</u>
Name of Operator: <u>K.P. Kauffman Company, Inc.</u>	No: <u>(303) 825-4822</u> Fax: <u>(303) 825-4825</u>	
Address: <u>1675 Broadway, Suite 2800</u>		
City: <u>Denver</u> State: <u>CO</u> Zip: <u>80202</u>		

API Number: 05-123-09084-00 OGCC Lease No.: _____ Other wells this lease? Y N

Well Name: UPRR 43 PanAm "G" Well Number: #9

Location (QtrQtr, Sec, Twp, Rng, Meridian): NE/SW Sec. 29-T1N-R67W 6th. pM

County: Weld Federal, Indian or State Lease Number: n/a

Field Name: Spindle Field Number: 77900

Complete the Attachment Checklist

	Oper	OGCC
Wellbore Diagram		
Cement Job Summary	X	
Wireline Job Summary	X	
Halliburton	X	
Sundry Notice	X	

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: Yes No Top of Casing Cement: _____

Fish in Hole: Yes No If yes, explain details below: _____

Wellbore has Uncemented Casing Leaks: Yes No If yes, explain details below: _____

Details: Casing Leaks: 1448' - 1790'



Current and Previously Abandoned Zones

Formation	Perforations - Top	Perforations - Bottom	Date Abandoned	Method of Isolation (None, Squeezed, BP, Cement, etc.)	Plug Depth
Sussex	4846'	4874'		None	

Casing History

Casing String	Casing Size	Casing Depth	Cement Top	Stage Cement Top
Sfc	8-5/8"	876'	Sfc	
1st.	4-1/2"	4963'		

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 4795' with 2 sacks cmt on top. CIBP #2: Depth _____ with _____ sacks cmt on top. NOTE: Two (2) sacks cement required on all CIBPs.

Set 40 sks cmt from 1300' ft. to 1200' ft. in Casing Open Hole Annulus

Set 10 sks cmt from 442 ft. to _____ ft. in Casing Open Hole Annulus

Set _____ sks cmt from _____ ft. to _____ ft. in Casing Open Hole Annulus

Set _____ sks cmt from _____ ft. to _____ ft. in Casing Open Hole Annulus

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

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

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

Set 100 sacks half in, half out surface casing from 910' ft. to 810' (Done: 12/28/00)

Set 10 sacks at surface

Cut four feet below ground level, weld on plate Dry-Hole Marker: Yes No

Set _____ sacks in rat hole Set _____ sacks in mouse hole

Additional Plugging Information for Subsequent Report Only

Casing Recovered: 1362' ft. of 4-1/2" inch casing. Plugging Date: 01/02/01

*Wireline Contractor: ADI Wireline

*Cementing Contractor: KWS/Halliburton

Type of Cement and Additives Used: Class "G" neat

*Attach Job Summaries. SEE: Sundry Notice (attached)

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

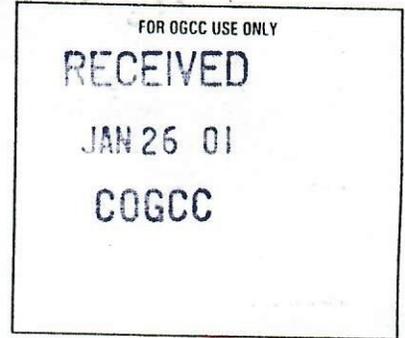
Print Name: Rick Ohlemeier

Signed: R Ohlemeier (by: M. G. G. G.) Title: Compl./WrkOver Suprv Date: 01/03/01

OGCC Approved: _____ Title: Pe Date: 1/4/2002

CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



1. OGCC Operator Number: 46290 API Number: 05-123-09084-00
2. Name of Operator: K.P. Kauffman Co., Inc.
3. Well Name: UPRR 43 PanAm "G" Well Number: #9
4. Location (QtrQtr, Sec, Twp, Rng, Meridian): NE/SW Sec.29-T1N-R67W 6th. pM

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within 30 days of work completed as a "subsequent" report and must accompany Form 4, page 1.



6. **DESCRIBE PROPOSED OR COMPLETED OPERATIONS**

Additional Plugging Information for Subsequent Report:

- 12/28/00 100 sx plug from 910' to 810' did not mix to proper weight. Circulated plug out of hole (per: Linda Pavelka's orders).
- 01/02/01 Ran tubing but stacked out on cement that was not circulated out of hole at 448'. Per Linda Pavelka's orders, mix & pump 100 sx (Halliburton) from 448' to sfc. Pull all but one joint tubing. Mix & pump 10 sx at sfc to insure good top plug.
- 01/09/01 Cut off 8-5/8", 5' below ground level and weld on cap.

Per: R. Ulmeier (by: M. Grigsby)
Compl/WkOvr Suprv. 01/03/01



KAUFFMAN WELL SERVICE, INC.

TICKET NUMBER **37292****RECEIVED**1675 BROADWAY, SUITE 1970
DENVER, COLORADO 80202Customer K.P. KAUFFMAN, Co., INC.

JAN 26 01

Address _____

COGCC

Date

1-17-01Lease UPPER 43 DAN AM Well No. 3 # 9

Customer P.O. No. _____

Contractor Job No. CEMENT CODE

FROM	TO	HOURS	WORK PERFORMED	TOTAL AMOUNT
0800	1400	6	12-28-00 : MIX & PUMP 40 SK CEMENT CLASS "G", NEAT AND SPOT FROM 1300' TO 1200' IN OPEN HOLE. RESET TBG AT 910'. MIX & PUMP 100 SK PLUG FROM 910' INTO SURFACE CASING, BUT CEMENT NOT UP TO WEIGHT. CIRCULATE PLUG OUT OF HOLE PER L. PAVELKA. RINSE EQUIP. & WATERIZE PUMPS.	5

EMPLOYEES TIME	HOURS	RATE	AMOUNT	EQUIPMENT	UNIT No.	HOURS	RATE	AMOUNT
Operator				Pickup				
Foreman								
Helpers				PUMP TRUCK	338	6	86/HR	516.00
				CEMENT BULK TRUCK	224	6	65/HR	390.00
				Backhoe				
				Trackhoe				
TOTALS				Winch Truck				
MATERIALS BOUGHT OUT			AMOUNT	Bobtail Water Truck (80 bbls)				
140 SKS CLASS G CEMENT			N/A	Transport (150 bbls)				
WITH NO ADDITIVES				Dozer ()				
			PRE-CHARGED RD.	Hot Oil Truck				
				Blade				
TOTAL				Dump Truck				

Approved [Signature]
FOR CUSTOMER

Approved _____
FOR CONTRACTOR

TOTAL TICKET AMOUNT 906.00



JOB SUMMARY

REGION NORTH AMERICA LAND	NWA / COUNTRY WESTERN	SAP #/TICKET # 1063611	TICKET DATE 01/02/01
MBU ID / EMPL # BR106 121999	H.E.S EMPLOYEE NAME MAGRUDER	BDA / STATE DENVER, CO	COUNTY WELD
LOCATION Brighton, CO	COMPANY K P KAUFFMAN	PSL DEPARTMENT ZONAL ISOLATION	RECEIVED JAN 26 01
TICKET AMOUNT	WELL TYPE GAS	CUSTOMER REP / PHONE RICK OHLEMERIER	
WELL LOCATION W OF FT LUPTON	DEPARTMENT CEMENTING SERVICES 10003	SAP BOMB NUMBER	Description PTA
LEASE NAME UPRR 43 PAN AM	Well No. G-9	SEC / TWP / RING	

H.E.S. EMP NAME / EMP # / (EXPOSURE HOURS)	HRS	HRS	HRS	HRS
MAGRUDER 121999	2.0			
JOHN HERRERA 121750	2.0			
NAGY	2.0			

H.E.S. UNIT #S / (R / T MILES)	R / T MILES			
424949	30			
54176/78323	30			

Form. Name _____	Type: _____	Date	Called Out	On Location	Job Started	Job Completed
Form. Thickness _____	From _____ To _____		1/2/01	1/2/01	1/2/01	1/2/01
Packer Type _____	Set At _____	Time	0600	0830	1000	1037
Bottom Hole Temp. _____	Pressure _____					
Retainer Depth _____	Total Depth _____					

Type and Size	Qty	Make	New/Used	Weight	Size	Grade	From	To	Max. Allow
Float Collar			N	23.0	8 5/8		0	800	500
Float Shoe									
Centralizers									
Top Plug				4.7	2 1/4		0	448	500
Packer									
DV Tool									Shots/Ft.
Other									
Other									
Other									

Material	Density	Lb/Gal	Date	Hours	Date	Hours	Description of Job
Mud Type _____	_____	_____	1/2	2.0	1/2	0.5	See Job Log
Disp. Fluid _____	_____	_____					
Prop. Type _____	_____	_____					
Prop. Type _____	_____	_____					
Acid Type _____	_____	_____					
Acid Type _____	_____	_____					
Surfactant _____	_____	_____					
NE Agent _____	_____	_____					
Fluid Loss _____	_____	_____					
Gelling Agent _____	_____	_____					
Fric. Red. _____	_____	_____					
Breaker _____	_____	_____					
Blocking Agent _____	_____	_____					
Perfpac Balls _____	_____	_____					
Other _____							
Other _____							
Other _____							
Other _____							
Other _____							

Stage	Sacks	Cement	Bulk/Sks	Additives	W/Rq.	Yield	Lbs/Gal
1	110	STANDARD	B	NEAT	5.20	1.15	15.6

Summary			
Circulating _____	Displacement _____	Preflush: Gal - BBI _____	12
Breakdown _____	Maximum _____	Load & Bkdn: Gal - BBI _____	
Lost Returns-YES _____	Lost Returns-NO _____	Excess /Return Gal BBI _____	
Cmt Rtm#Bbl _____	Actual TOC _____	Calc. TOC: _____	URFAC
Average _____	Frac. Gradient _____	Treatment: Gal - BBI _____	
Shut In: Instant _____	5 Min. _____	Cement Slurry Gal - BBI _____	23
	15 Min. _____	Total Volume Gal - BBI _____	36

THE INFORMATION STATED HEREIN IS CORRECT
 CUSTOMER REPRESENTATIVE _____