

Replug By Other Operator

Document Number:
403874700

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.

ECMC Operator Number: 10487 Contact Name: Deborah Abrams
 Name of Operator: SPRINGDALE PARTNERS LLC Phone: (303) 8942100
 Address: 3409 MONTECLAIRE DR Fax: _____
 City: SHERMAN State: TX Zip: 75092 Email: deborah.abrams@state.co.us

For "Intent" 24 hour notice required, Name: Schure, Kym Tel: (970) 520-3832
 Email: kym.schure@state.co.us

ECMC contact:

Type of Well Abandonment Report: Notice of Intent to Abandon Subsequent Report of Abandonment

API Number 05-075-09254-00
 Well Name: SPRINGDALE Well Number: 7 (OWP)
 Location: QtrQtr: SWNE Section: 16 Township: 8N Range: 53W Meridian: 6
 County: LOGAN Federal, Indian or State Lease Number: OG 63/59
 Field Name: SPRINGDALE Field Number: 78300

Only Complete the Following Background Information for Intent to Abandon

Latitude: 40.662210 Longitude: -103.303710
 GPS Data: GPS Quality Value: 3.7 Type of GPS Quality Value: _____ Date of Measurement: 12/18/2013

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

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
D SAND	4772	4776			
J SAND	4875	4894	08/23/1993	SQUEEZED	

Total: 2 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	UNK	23	0	516	290	516	0	VISU
1ST	7+7/8	5+1/2	UNK	15.5	0	5003	235	5003	3832	CBL

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 4800 with 3 sacks cmt on top. CIBP #2: Depth 4703 with 3 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 35 sks cmt from 632 ft. to 466 ft. Plug Type: ANNULUS Plug Tagged:
 Set 25 sks cmt from 632 ft. to 466 ft. Plug Type: CASING Plug Tagged:
 Set _____ sks cmt from _____ ft. to _____ ft. Plug Type: _____ Plug Tagged:
 Set _____ sks cmt from _____ ft. to _____ ft. Plug Type: _____ Plug Tagged:
 Set _____ sks cmt from _____ ft. to _____ ft. Plug Type: _____ Plug Tagged:

Perforate and squeeze at 3790 ft. with 40 sacks. Leave at least 100 ft. in casing 3700 CICR Depth
 Perforate and squeeze at 1430 ft. with 40 sacks. Leave at least 100 ft. in casing 1340 CICR Depth
 Perforate and squeeze at 100 ft. with 35 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 _____ 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 Number of Days from Setting Surface Plug to Capping or Sealing the Well: _____
 Surface Plug Setting Date: _____ Cut and Cap Date: _____
 *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: Deborah Abrams
 Title: OWP Date: _____ Email: deborah.abrams@state.co.us

Based on the information provided herein, this Well Abandonment Report (Form 6) complies with ECMC Rules and applicable orders and is hereby approved.

ECMC Approved: _____ Date: _____

CONDITIONS OF APPROVAL, IF ANY LIST

Expiration Date: _____

<u>COA Type</u>	<u>Description</u>
0 COA	

ATTACHMENT LIST

Att Doc Num

Name

403874713

WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

Stamp Upon
Approval

Total: 0 comment(s)