

FORM  
6Rev  
11/20

## State of Colorado

## Energy &amp; 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:

403884580

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: 10695

Contact Name: Deborah Abrams

Name of Operator: BEHRENS RESOURCES INC

Phone: (303) 8942100

Address: PO BOX 188

Fax:

City: DEER TRAIL State: CO Zip: 80135

Email: deborah.abrams@state.co.us

For "Intent" 24 hour notice required,

Name: Medina, Justin

Tel: (720) 471-0006

ECMC contact:

Email: justin.medina@state.co.us

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

API Number 05-001-07981-00

Well Name: C LISCO

Well Number: 14-21 (OWP)

Location: QtrQtr: NENW Section: 14 Township: 3S Range: 64W Meridian: 6

County: ADAMS

Federal, Indian or State Lease Number:

Field Name: SONAR

Field Number: 77635

## Only Complete the Following Background Information for Intent to Abandon

Latitude: 39.794490 Longitude: -104.519900

GPS Data: GPS Quality Value: 5.3 Type of GPS Quality Value: Date of Measurement: 09/22/2010

Reason for Abandonment: ☐ Dry ☐ Production Sub-economic ☐ Mechanical Problems☒ Other OWPCasing to be pulled: ☐ Yes ☐ No Estimated Depth:Fish in Hole: ☐ Yes ☐ No If yes, explain details belowWellbore 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	7883	7889			

Total: 1 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+7/8	UNK	24	0	209	200	209	0	VISU
1ST	7+7/8	5+1/2	UNK	15.5	0	8128	200	8128	7330	CBL

## Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 7808 with 3 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 <u>75</u> sks cmt from <u>1717</u> ft. to <u>1350</u> ft.	Plug Type: <u>ANNULUS</u>	Plug Tagged: <input type="checkbox"/>
Set <u>15</u> sks cmt from <u>1717</u> ft. to <u>1350</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input checked="" type="checkbox"/>
Set <u>75</u> sks cmt from <u>943</u> ft. to <u>595</u> ft.	Plug Type: <u>ANNULUS</u>	Plug Tagged: <input type="checkbox"/>
Set <u>15</u> sks cmt from <u>943</u> ft. to <u>595</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input checked="" type="checkbox"/>
Set _____ sks cmt from _____ ft. to _____ ft.	Plug Type: _____	Plug Tagged: <input type="checkbox"/>

Perforate and squeeze at 7048 ft. with 40 sacks. Leave at least 100 ft. in casing 6998 CICR Depth  
Perforate and squeeze at 4800 ft. with 40 sacks. Leave at least 100 ft. in casing 4750 CICR Depth  
Perforate and squeeze at 2145 ft. with 40 sacks. Leave at least 100 ft. in casing 2095 CICR Depth  
(Cast Iron Cement Retainer Depth)

Set \_\_\_\_\_ sacks half in. half out surface casing from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Plug Tagged: ☐

Set 100 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: \_\_\_\_\_

COA Type	Description
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0 COA	
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**ATTACHMENT LIST**

**Att Doc Num**

**Name**

403884717

WELLBORE DIAGRAM

Total Attach: 1 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

Stamp Upon  
Approval

Total: 0 comment(s)