

Replug By Other Operator

Document Number:
404542085

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: 66190 Contact Name: Deborah Abrams

Name of Operator: OMIMEX PETROLEUM INC Phone: (303) 8942100

Address: 100 CRESCENT CT SUITE700-#5528 Fax: _____

City: DALLAS State: TX Zip: 75201 Email: deborah.abrams@state.co.us

For "Intent" 24 hour notice required, Name: Schure, Kym Tel: (970) 520-3832

ECMC contact: Email: kym.schure@state.co.us

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

API Number 05-095-06192-00

Well Name: MOSS Well Number: 11-25-7-45(OWP)

Location: QtrQtr: NESW Section: 25 Township: 7N Range: 45W Meridian: 6

County: PHILLIPS Federal, Indian or State Lease Number: _____

Field Name: HOLYOKE SOUTH Field Number: 36650

Only Complete the Following Background Information for Intent to Abandon

Latitude: 40.548430 Longitude: -102.333450

GPS Data: GPS Quality Value: 2.2 Type of GPS Quality Value: _____ Date of Measurement: 11/15/2010

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
NIOBRARA	2536	2579			
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	9+7/8	7	UNK	UNK	0	461	211	461	0	VISU
1ST	6+1/4	4+1/2	UNK	UNK	0	2774	182	2774	100	CBL

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 2461 with 2 sacks cmt on top. CIBP #2: Depth 1200 with 2 sacks cmt on top.
CIBP #3: Depth 511 with 2 sacks cmt on top. CIBP #4: Depth 100 with 10 sacks cmt on top.
CIBP #5: Depth _____ with _____ sacks cmt on top.

NOTE: Two(2) sacks cement required on all CIBPs.

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:
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 _____ 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
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(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
Surface Plug Setting Date: _____ Cut and Cap Date: _____ Number of Days from Setting Surface Plug to Capping or Sealing the Well: _____

*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

<u>Att Doc Num</u>	<u>Name</u>
404542097	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)