

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: 22315 Contact Name: Todd Rosenkrance
 Name of Operator: D & D RESOURCES INC Phone: (720) 8224925
 Address: 2835 VILLA WAY #4 Fax: _____
 City: GRAND JUNCTION State: CO Zip: 81501 Email: todd.rosenkrance@state.co.us

For "Intent" 24 hour notice required, Name: Popejoy, Dusty Tel: (720) 822-1471
 Email: dusty.popejoy@state.co.us
ECMC contact:

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

API Number 05-103-01357-00
 Well Name: EMERALD-C Well Number: E-97 (OWP)
 Location: QtrQtr: SWSE Section: 36 Township: 2N Range: 103W Meridian: 6
 County: RIO BLANCO Federal, Indian or State Lease Number: _____
 Field Name: RANGELY Field Number: 72370

Only Complete the Following Background Information for Intent to Abandon

Latitude: 40.095624 Longitude: -108.902309
 GPS Data: GPS Quality Value: _____ Type of GPS Quality Value: _____ Date of Measurement: _____
 Reason for Abandonment: Dry Production Sub-economic Mechanical Problems
 Other Orphan Well Program
 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

Total: 0 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	10+0/1	8+5/8	N/A	N/A	0	30	0	0	0	
OPEN HOLE	7+0/1	0+0/1	N/A	N/A	0	2200	0	0	0	

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth _____ with _____ 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 27 sks cmt from 1920 ft. to 1820 ft. Plug Type: OPEN HOLE Plug Tagged:
Set 27 sks cmt from 1290 ft. to 1190 ft. Plug Type: OPEN HOLE 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 34 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: Todd Rosenkrance
Title: OWP Field Specialist Date: _____ Email: todd.rosenkrance@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>
404635280	WELL ABANDONMENT REPORT (INTENT)

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)