

014-09232

Shelton 12/10

FORM 6

State of Colorado



Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303) 894-2100 Fax: (303) 894-2109

UN OIL & GAS

FOR OGCC USE ONLY

WELL ABANDONMENT REPORT

MKBZ

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>100125</u>                    | Contact Name and Telephone<br><u>JOE ABELL</u> | 24 hour notice required contact:<br><b>S</b> |
| Name of Operator: <u>CHANDLER ENERGY, LLC</u>          | No: <u>720-482-1213</u>                        |                                              |
| Address: <u>475 17th St, Suite 1210</u>                | Fax: <u>720-482-1214</u>                       |                                              |
| City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u> |                                                |                                              |

|                                                                        |                                                                                          |                                                                                                                                                                                              |
|------------------------------------------------------------------------|------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| API Number: <u>05-014-09232</u> OGCC Lease No.: <u>5999</u>            | Other wells this lease? <input checked="" type="checkbox"/> Y <input type="checkbox"/> N | Complete the Attachment Checklist<br>OGCC<br>Wellbore Diagram: _____<br>Cement Job Summary: <input checked="" type="checkbox"/><br>Wireline Job Summary: <input checked="" type="checkbox"/> |
| Well Name: <u>DAVIS</u> Well Number: <u>44-6</u>                       |                                                                                          |                                                                                                                                                                                              |
| Location (Otr/Otr Sec. Twp. Rng. Meridian): <u>3E 5E SEC 15-68W</u>    |                                                                                          |                                                                                                                                                                                              |
| County: <u>BROOMFIELD</u> Federal, Indian or State Lease Number: _____ |                                                                                          |                                                                                                                                                                                              |
| Field Name: <u>WATTENBERG</u> Field Number: <u>90750</u>               |                                                                                          |                                                                                                                                                                                              |

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: \_\_\_\_\_

Current and Previously Abandoned Zones

| Formation         | Perforations - Top | Perforations - Bottom | Date Abandoned | Method of Isolation (None, Squeezed, BP, Cement, etc.) | Plug Depth |
|-------------------|--------------------|-----------------------|----------------|--------------------------------------------------------|------------|
| <u>CODELL</u>     | <u>815'</u>        | <u>816'</u>           |                |                                                        |            |
| <u>NIOBRARA B</u> | <u>7920'</u>       | <u>7934'</u>          |                |                                                        |            |
| <u>NIOBRARA A</u> | <u>7743</u>        | <u>7745</u>           |                |                                                        |            |

Casing History

| Casing String             | Casing Size       | Casing Depth | Cement Top   | Stage Cement Top |
|---------------------------|-------------------|--------------|--------------|------------------|
| <u>SURFACE PRODUCTION</u> | <u>8 1/2" 35'</u> | <u>1327'</u> | <u>8272'</u> | <u>7226'</u>     |

Plugging Procedure for Intent and Subsequent Report

CIBP #1 Depth 7565' with 2 sacks cmt on top. CIBP #2: Depth \_\_\_\_\_ with \_\_\_\_\_ sacks cmt on top

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

|                                                                                                                                                                            |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Set: <u>50</u> sks cmt from _____ ft. to <u>2120</u> ft. in <input type="checkbox"/> Casing <input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Annulus |
| Set: _____ sks cmt from _____ ft. to _____ ft. in <input type="checkbox"/> Casing <input type="checkbox"/> Open Hole <input type="checkbox"/> Annulus                      |
| Set: _____ sks cmt from _____ ft. to _____ ft. in <input type="checkbox"/> Casing <input type="checkbox"/> Open Hole <input type="checkbox"/> Annulus                      |
| Set: _____ sks cmt from _____ ft. to _____ ft. in <input type="checkbox"/> Casing <input type="checkbox"/> Open Hole <input type="checkbox"/> Annulus                      |
| Set: _____ sks cmt from _____ ft. to _____ ft. in <input type="checkbox"/> Casing <input type="checkbox"/> Open Hole <input type="checkbox"/> 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: 50 sacks half in, half out surface casing from 1246 ft to 1446 ft 1100 PER TAG

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 2298 ft of 3 1/2 inch casing. Plugging Date: FEBRUARY 5, 2003.

Wireline Contractor: BRANDEX

Cementing Contractor: HALLIBURTON

Type of Cement and Additives Used: REGULAR 2% CARB IN CASING SHOP PLUG

Attach Job Summaries: YAG SHOP PLUG RT. 1100'

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

Print Name: J. M. ABELL

Signed: [Signature] Title: AGENT Date: FEBRUARY 17, 2003

OGCC Approved: [Signature] Title: PE Date: 2/28/2003

CONDITIONS OF APPROVAL, IF ANY:



