

**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: 1 Contact Name: Bill Wade  
 Name of Operator: UNKNOWN Phone: (720) 9168603  
 Address: XXXXXXXXXXXXXXXXXXXX Fax: \_\_\_\_\_  
 City: XXXXXX State: XX Zip: \_\_\_\_\_ Email: bill.wade@state.co.us

**For "Intent" 24 hour notice required,** Name: Browning, Chuck Tel: (970) 433-4139  
 Email: chuck.browning@state.co.us

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

API Number 05-091-05000-00  
 Well Name: INTEX S P - D HALLS Well Number: 1 (OWP)  
 Location: QtrQtr: SESW Section: 35 Township: 45N Range: 8W Meridian: N  
 County: OURAY Federal, Indian or State Lease Number: \_\_\_\_\_  
 Field Name: WILDCAT Field Number: 99999

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

Latitude: 38.102733 Longitude: -107.715088  
 GPS Data: GPS Quality Value: \_\_\_\_\_ Type of GPS Quality Value: \_\_\_\_\_ Date of Measurement: \_\_\_\_\_  
 Reason for Abandonment:  Dry  Production Sub-economic  Mechanical Problems  
 Other OWP WELL  
 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	16+0/1	13+3/8	H-40	48		295	125	295	0	CALC

## Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 290 with 255 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 70 sks cmt from 1965 ft. to 1865 ft. Plug Type: OPEN HOLE Plug Tagged:   
Set 70 sks cmt from 1500 ft. to 1400 ft. Plug Type: OPEN HOLE Plug Tagged:   
Set 280 sks cmt from 640 ft. to 295 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:

Perforate and squeeze at \_\_\_\_\_ ft. with \_\_\_\_\_ sacks. Leave at least 100 ft. in casing \_\_\_\_\_ CICR Depth  
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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

(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:

OWP WELL

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

Signed: \_\_\_\_\_ Print Name: Bill Wade  
Title: OWP field specialist Date: \_\_\_\_\_ Email: bill.wade@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>
404646422	WELLBORE DIAGRAM
404646425	OTHER
404646426	OTHER

Total Attach: 3 Files

**General Comments**

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

Total: 0 comment(s)