

State of Colorado
Oil and Gas Conservation Commission

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



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RECEIVED
OCT 24 2008
COGCC

WELL ABANDONMENT REPORT

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 twelve 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.

| COGCC Operator Number: 10084 Name of Operator: Pioneer Natural Resources USA, Inc. Address: 1401 17th Street - Suite 1200 City: Denver State: CO Zip: 80202 | Contact Name & Telephone Joy A. Ziegler No: 303-675-2663 Fax: 303-294-1275 | 24 hour notice required, contact: Tel: _____ | | | | | | | | | | | | | | | | | | | | | |
|---|---|--|--|------|------|------------------|--|--|--------------------|--|--|----------------------|--|--|--|--|--|--|--|--|--|--|--|
| API Number 05-081-07327 Well Name: BBB Well Number: 21-28 Location (QtrQtr, Sec, Twp, Rng, Meridian): NENW, Sec. 28, T7N-R93W County: Moffat Federal, Indian or State Lease Number: Fee Field Name: Wildcat Field Number: 99999 | | Complete the Attachment Checklist <table border="1"><thead><tr><th></th><th>Oper</th><th>OGCC</th></tr></thead><tbody><tr><td>Wellbore Diagram</td><td></td><td></td></tr><tr><td>Cement Job Summary</td><td></td><td></td></tr><tr><td>Wireline Job Summary</td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></tbody></table> | | Oper | OGCC | Wellbore Diagram | | | Cement Job Summary | | | Wireline Job Summary | | | | | | | | | | | |
| | Oper | OGCC | | | | | | | | | | | | | | | | | | | | | |
| Wellbore Diagram | | | | | | | | | | | | | | | | | | | | | | | |
| Cement Job Summary | | | | | | | | | | | | | | | | | | | | | | | |
| Wireline Job Summary | | | | | | | | | | | | | | | | | | | | | | | |
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☐ Notice of Intent to Abandon☒ Subsequent Report of Abandonment

Only Complete the Following Background Information for Intent to Abandon

Latitude: _____ Longitude: _____
GPS Data: _____
Date of Measurement: _____ PDOP Reading: _____ Instrument Operator's Name: _____
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 |
|-----------|--------------------|-----------------------|----------------|---|------------|
| | | | | | |
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Casing History

| String | Size of Hole | Size of Casing | Weight per ft | Setting Depth | Sacks Cement | Cement Bottom | Cement Top |
|---------|--------------|----------------|---------------|---------------|--------------|---------------|------------|
| Cond | 14-3/4 | 13-3/8 | 40# | 60' | 216' | 60' | Surface |
| Surface | 12-1/4 | 9-5/8 | 38# | 414' | 155' | 414' | Surface |
| | | | | | | | |
| | | | | | | | |

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth _____ with _____ sacks cmt on top. CIBP #2: Depth _____ with _____ sacks cmt on top.

| | | | | | | |
|-----------|--------------------|----------------|--------|--|------------------------------------|----------------------------------|
| Set 90 | sks cmt from 414 | ft. to SURFACE | ft. in | <input checked="" 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 |
| 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 90 sks to fill _____ sacks half in, half out surface casing from Surface ft. to 414 ft.
Set _____ 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

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

Additional Plugging Information for Subsequent Report Only

Casing Recovered: 0 ft. of _____ in. casing Plugging date: 10/1/08
*Wireline Contractor: _____ *Cementing Contractor: Northwest Ready Mix Operations, Inc.
Type of Cement and Additives Used: Grout
*Attach job summaries.

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

Print Name: Joy A. Ziegler Email: joy.ziegler@pxd.com
Signed: _____ Title: Senior Engineering Tech Date: 10/22/2008
OGCC Approved: _____ Title: PE II Date: 5/25/2010

CONDITIONS OF APPROVAL, IF ANY:



NORTHWEST READY MIX OPERATIONS, INC.

P.O. Box 968

Craig, CO 81626

Batch Plant (970) 824-0022

Office (970) 824-5252

CONTROL NO.

46270

CERTIFICATE OF QUALITY

We guarantee that this concrete will equal or exceed the quality ordered, provided concrete is ordered and placed within the criteria of the applicable mix design specification and tested in accordance with ASTM Materials Standards. Customer assumes responsibility if he exceeds water allowable.

| | | | | | | | |
|--|---------------|-------------|--------------|--------------------------|------------|--------------------|-----------------|
| ON ROUTE | AR. JOB | START POUR | STAND-BY | END POUR | LV. JOB | AR. PLT. | GAL. ADD ON JOB |
| PLANT | CUST. NO. | JOB NO. | ZONE | LOAD NO. | TIME | DATE | TICKET NO. |
| PLANT 2 | | 28 | | 1 | 12:34 | 23-Sep-88 | 46270 |
| SOLD TO | | | | DELIVERY ADDRESS | | | |
| P.O. Box 968 | | | | LAWYER PIONEER RESOURCES | | | |
| Phone 824-8912 | | | | NOTE | | | |
| | | | | BBB 21-28 | | | |
| TRUCK NO. | LICENSE | DRIVER | INSTRUCTIONS | | | | |
| 82 | | WBE | PIPE FILL | | | | |
| ALL WATER | FREE WATER | BATCH WATER | MAX. WATER | SAND MOIS. | REQ. SLUMP | PO. NO. | CREDIT CODE |
| 1.35 gal | 5 gal | 1.35 gal | 5 gal | 8.3% | 4.3 | | 000 |
| TOTAL ORDERED | TOTAL SHIPPED | THIS TICKET | PRODUCT CODE | PRODUCT DESCRIPTION | UNITS | UNIT PRICE | EXTENSION |
| | 4.38 | 4.38 | 1800 | 6.5K BRGUT | Yard | 125.00 | 607.50 |
| RECEIPT: Purchaser releases supplier of damage responsibility if delivery is requested inside curb or sidewalk. Contractor or property owner will be responsible for providing a proper wash area after placement. | | | | | | DEPUTY WEIGHMASTER | |
| | | | | | | SUBTOTAL | |
| | | | | | | T X 1.000% | |
| | | | | | | 29.7 | |
| STANDING TIME | | | | | | PREVIOUS BALANCE | |
| HOURS _____ MIN. _____ | | | | | | 2.88 | |
| RATE _____ | | | | | | SUB TOTAL | |
| | | | | | | 837.25 | |
| NOTICE: Please read complete terms and conditions on the reverse side prior to signing. | | | | | | STAND-BY CHARGES | |
| NORTHWEST READY MIX OPERATIONS, INC. | | | | | | TOTAL | |
| | | | | | | | |

Received By

Rum Lindem
BBB 21-28

ELOM 1350 100
CEMENT 2 1750 100
FLY ASH 740 100
Water 125 gal
222-B 76 02