


FORM 6 Rev 12/05	State of Colorado Oil and Gas Conservation Commission 1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">DE</td> <td style="width:25%;">ET</td> <td style="width:25%;">OE</td> <td style="width:25%;">ES</td> </tr> </table> Date Received: 04/08/2011 Document Number: 400151360	DE	ET	OE	ES												
DE	ET	OE	ES																
WELL ABANDONMENT REPORT																			
<p>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.</p> <p>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.</p>																			
<table style="width:100%;"> <tr> <td style="width:50%;">OGCC Operator Number: <u>44390</u></td> <td style="width:50%;">Contact Name: <u>Jim Javernick</u></td> </tr> <tr> <td>Name of Operator: <u>JAVERNICK OIL</u></td> <td>Phone: <u>(719) 275-3040</u></td> </tr> <tr> <td>Address: <u>3040 E MAIN</u></td> <td>Fax: <u>(719) 275-4590</u></td> </tr> <tr> <td>City: <u>CANON CITY</u> State: <u>CO</u> Zip: <u>81212</u></td> <td>Email: <u>javernick1@bresnan.net</u></td> </tr> </table>				OGCC Operator Number: <u>44390</u>	Contact Name: <u>Jim Javernick</u>	Name of Operator: <u>JAVERNICK OIL</u>	Phone: <u>(719) 275-3040</u>	Address: <u>3040 E MAIN</u>	Fax: <u>(719) 275-4590</u>	City: <u>CANON CITY</u> State: <u>CO</u> Zip: <u>81212</u>	Email: <u>javernick1@bresnan.net</u>								
OGCC Operator Number: <u>44390</u>	Contact Name: <u>Jim Javernick</u>																		
Name of Operator: <u>JAVERNICK OIL</u>	Phone: <u>(719) 275-3040</u>																		
Address: <u>3040 E MAIN</u>	Fax: <u>(719) 275-4590</u>																		
City: <u>CANON CITY</u> State: <u>CO</u> Zip: <u>81212</u>	Email: <u>javernick1@bresnan.net</u>																		
<table style="width:100%;"> <tr> <td style="width:30%;">For "Intent" 24 hour notice required, COGCC contact:</td> <td style="width:35%;">Name: <u>LEONARD, MIKE</u></td> <td style="width:35%;">Tel: <u>(719) 647-9715</u></td> </tr> <tr> <td></td> <td colspan="2">Email: <u>mike.leonard@state.co.us</u></td> </tr> </table>				For "Intent" 24 hour notice required, COGCC contact:	Name: <u>LEONARD, MIKE</u>	Tel: <u>(719) 647-9715</u>		Email: <u>mike.leonard@state.co.us</u>											
For "Intent" 24 hour notice required, COGCC contact:	Name: <u>LEONARD, MIKE</u>	Tel: <u>(719) 647-9715</u>																	
	Email: <u>mike.leonard@state.co.us</u>																		
<table style="width:100%;"> <tr> <td style="width:20%;">API Number <u>05-043-06112-00</u></td> <td style="width:20%;">Well Name: <u>CONOCO</u></td> <td style="width:20%;">Well Number: <u>8-42</u></td> <td style="width:40%;"></td> </tr> <tr> <td>Location: QtrQtr: <u>SESE</u> Section: <u>8</u> Township: <u>19S</u> Range: <u>69W</u> Meridian: <u>6</u></td> <td colspan="3"></td> </tr> <tr> <td>County: <u>FREMONT</u></td> <td colspan="3">Federal, Indian or State Lease Number: _____</td> </tr> <tr> <td>Field Name: <u>FLORENCE-CANON CITY</u></td> <td colspan="3">Field Number: <u>24600</u></td> </tr> </table>				API Number <u>05-043-06112-00</u>	Well Name: <u>CONOCO</u>	Well Number: <u>8-42</u>		Location: QtrQtr: <u>SESE</u> Section: <u>8</u> Township: <u>19S</u> Range: <u>69W</u> Meridian: <u>6</u>				County: <u>FREMONT</u>	Federal, Indian or State Lease Number: _____			Field Name: <u>FLORENCE-CANON CITY</u>	Field Number: <u>24600</u>		
API Number <u>05-043-06112-00</u>	Well Name: <u>CONOCO</u>	Well Number: <u>8-42</u>																	
Location: QtrQtr: <u>SESE</u> Section: <u>8</u> Township: <u>19S</u> Range: <u>69W</u> Meridian: <u>6</u>																			
County: <u>FREMONT</u>	Federal, Indian or State Lease Number: _____																		
Field Name: <u>FLORENCE-CANON CITY</u>	Field Number: <u>24600</u>																		
<input checked="" type="checkbox"/> Notice of Intent to Abandon <input type="checkbox"/> Subsequent Report of Abandonment																			
<i>Only Complete the Following Background Information for Intent to Abandon</i>																			
Latitude: <u>38.406000</u> Longitude: <u>-105.129000</u>																			
GPS Data:																			
Data of Measurement: <u>08/16/2006</u> PDOP Reading: <u>2.2</u> GPS Instrument Operator's Name: <u>Larry Robbins</u>																			
Reason for Abandonment: <input checked="" type="checkbox"/> Dry <input type="checkbox"/> Production for Sub-economic <input type="checkbox"/> Mechanical Problems																			
<input type="checkbox"/> Other _____																			
Casing to be pulled: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Top of Casing Cement: _____																			
Fish in Hole: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, explain details below																			
Wellbore has Uncemented Casing leaks: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, explain details below																			
Details: _____																			
Current and Previously Abandoned Zones																			
<u>Formation</u>	<u>Perf. Top</u>	<u>Perf. Btm</u>	<u>Abandoned Date</u>	<u>Method of Isolation</u>	<u>Plug Depth</u>														
PIERRE	160	3000																	
Total: 1 zone(s)																			
Casing History																			
Casing Type	Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bot	Cement Top	Status											
SURF	12+1/2	9+5/8	28	160	30	160	0												
1ST LINER	8+3/4	7	23	1,800	0	0	0												

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 250 with 55 sacks cmt on top. CIPB #2: Depth _____ with _____ sacks cmt on top.
 CIBP #3: Depth _____ with _____ sacks cmt on top. CIPB #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 105 sks cmt from 250 ft. to 0 ft. in Plug Type: CASING Plug Tagged: ☐
 Set _____ sks cmt from _____ ft. to _____ ft. in Plug Type: _____ Plug Tagged: ☐
 Set _____ sks cmt from _____ ft. to _____ ft. in Plug Type: _____ Plug Tagged: ☐
 Set _____ sks cmt from _____ ft. to _____ ft. in Plug Type: _____ Plug Tagged: ☐
 Set _____ sks cmt from _____ ft. to _____ ft. in 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
 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 Plugging Date: _____

*Wireline Contractor: _____ *Cementing Contractor: _____

Type of Cement and Additives Used: _____

Flowline/Pipeline has been abandoned per Rule 1103 ☐ Yes ☐ No *ATTACH JOB SUMMARY

Technical Detail/Comments:

Quantities of cement are:
 55 feet (concrete mix) on the CIBP at 250' and 105 cu ft (10 sack/cu yd grout mix w/ sand) from there to surface.

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

Signed: _____ Print Name: James J.

Title: Javernick Date: 4/8/2011 Email: javernick1@bresnan.net

Based on the information provided herein, this Well Abandonment Report (Form 6) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: SUTPHIN, DIRK Date: 4/8/2011

CONDITIONS OF APPROVAL, IF ANY: _____ Expiration Date: 10/7/2011

1) Provide 24 hour notice of MIRU to Mike Leonard at 719-647-9715 or e-mail at mike.leonard@state.co.us

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)