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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.

OGCC Operator Number: 10156 Contact Name: Brett Anderson
 Name of Operator: BECCA OIL LLC Phone: (918) 2252334
 Address: P O BOX 1347 Fax: _____
 City: CUSHING State: OK Zip: 74023 Email: gina.beccaoil@gmail.com

For "Intent" 24 hour notice required, Name: _____ Tel: _____
 COGCC contact: Email: _____

API Number 05-099-06128-00 Well Number: 1-30
 Well Name: KEN NEVIUS
 Location: QtrQtr: SESE Section: 30 Township: 22S Range: 45W Meridian: 6
 County: PROWERS Federal, Indian or State Lease Number: _____
 Field Name: BERRY PATCH Field Number: 6150

Notice of Intent to Abandon Subsequent Report of Abandonment

Only Complete the Following Background Information for Intent to Abandon

Latitude: 38.101891 Longitude: -102.506246
 GPS Data:
 Date of Measurement: 07/06/2012 PDOP Reading: 1.0 GPS Instrument Operator's Name: Mike Pollant
 Reason for Abandonment: Dry Production Sub-economic Mechanical Problems
 Other _____
 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
MORROW	4669	4680	06/22/2016	B PLUG CEMENT TOP	4660
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+1/4	8+5/8	24	308	350	308	0	VISU
1ST	7+7/8	4+1/2	11.6	4,930	200	4,930	4,430	CBL
S.C. 1.1				1,680	300	1,680	940	CALC

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 1750 with 15 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 40 sks cmt from 4660 ft. to 4100 ft. Plug Type: CASING 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:
Set _____ sks cmt from _____ ft. to _____ ft. Plug Type: _____ Plug Tagged:

Perforate and squeeze at 800 ft. with 40 sacks. Leave at least 100 ft. in casing _____ CICR Depth
Perforate and squeeze at 360 ft. with 40 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 75 sacks half in. half out surface casing from 360 ft. to 0 ft. Plug Tagged:

Set _____ sacks at surface

Cut four feet below ground level, weld on plate Above Ground Dry-Hole Marker: Yes No

Set 25 sacks in rat hole Set _____ sacks in mouse hole

Additional Plugging Information for Subsequent Report Only

Casing Recovered: 0 ft. of _____ inch casing Plugging Date: 06/22/2016
*Wireline Contractor: Peak Wireline Services Inc *Cementing Contractor: Consolidated Oil Well Service
Type of Cement and Additives Used: 2% CC
Flowline/Pipeline has been abandoned per Rule 1103 Yes No *ATTACH JOB SUMMARY

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: Brett Anderson
Title: Manager Date: _____ Email: gina.beccaoil@gmail.com

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: _____ Date: _____

CONDITIONS OF APPROVAL, IF ANY:

COA Type

Description

COA Type	Description

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401152616	OPERATIONS SUMMARY
401152617	CEMENT JOB SUMMARY
401152620	CEMENT JOB SUMMARY
401152637	WELLBORE DIAGRAM

Total Attach: 4 Files

General Comments

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

Total: 0 comment(s)