

FORM
6Rev
05/18

State of Colorado Oil and Gas Conservation Commission

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



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Document Number:

402166995

Date Received:

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: 8960	Contact Name: Russell Schucker
Name of Operator: BONANZA CREEK ENERGY OPERATING COMPANY	Phone: (303) 479-6774
Address: 410 17TH STREET SUITE #1400	Fax:
City: DENVER State: CO Zip: 80202	Email: regulatory@bonanzacrk.com
For "Intent" 24 hour notice required, Name: Petrie, Erica Tel: (303) 726-3822 Email: erica.petrie@state.co.us	
COGCC contact:	

API Number: 05-123-23894-00	Well Number: 31-9
Well Name: PRONGHORN	
Location: QtrQtr: NWNE Section: 9 Township: 5N Range: 61W Meridian: 6	
County: WELD	Federal, Indian or State Lease Number:
Field Name: NORTH RIVERSIDE	Field Number: 60130

☒ Notice of Intent to Abandon
 ☐ Subsequent Report of Abandonment

Only Complete the Following Background Information for Intent to Abandon

Latitude: 40.421110	Longitude: -104.211750
GPS Data:	
Date of Measurement: 11/27/2006	PDOP Reading: 6.0
GPS Instrument Operator's Name: K. MCCOWEN	
Reason for Abandonment:	
<input type="checkbox"/> Dry	<input checked="" type="checkbox"/> Production Sub-economic
<input type="checkbox"/> Mechanical Problems	
<input type="checkbox"/> Other	
Casing to be pulled: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Estimated Depth: 750
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

Formation	Perf. Top	Perf. Btm	Abandoned Date	Method of Isolation	Plug Depth
NIOBRARA	6026	6190	03/05/2012	B PLUG CEMENT TOP	5965
CODELL	6296	6306	03/05/2012	B PLUG CEMENT TOP	6280
J SAND	6768	6779	07/12/2006	B PLUG CEMENT TOP	6730

Total: 3 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	365	300	373	0	CALC
1ST	7+7/8	4+1/2	11.6	6,821	560	6,803	2,395	CBL

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 5965 with 25 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 550 sks cmt from 850 ft. to 0 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 _____ 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. _____ inch casing Plugging Date: _____
of _____

*Wireline Contractor: _____ *Cementing Contractor: _____

Type of Cement and Additives Used: _____

Flowline/Pipeline has been abandoned per Rule 1105 ☐ Yes ☐ No *ATTACH JOB SUMMARY

Technical Detail/Comments:

- 1) MIRU ON LOCATION. ND WH, NU BOP, RU WORK FLOOR, CONTROL WELL, TOOHH WITH 2 3/8TH" TBG
- 2) TIH TAG CIBP @ 5965'
- 3) SPOT 25 SX PLUG ON TOP OF PLUG
- 4) TEST CSG. IF CASING DOESN'T TEST SET PLUG ACROSS LEAK.
- 5) MIRU WIRELINE. CUT AND PULL 4 1/2" CASING AT 750'
- 6) TIH WITH 2 3/8THS TBG TO 850'. MIRU CEMENTERS
- 7) MIRU CEMENTERS. ESTABLISH CIRCULATION, PUMP 550 SXS CEMENT TO SURFACE. TOOHH, LAY DOWN TBG
- 8) ND BOP. CUT OFF BELL NIPPLE & CASING TO 4' BELOW GROUND LEVEL. FILL TOP OF CASING WITH READY MIX
- 9) WELD ON PLATE. OPERATOR NAME, API NO., LOCATION
- 10) FILL SURFACE HOLE, MAKING SURE TO REPLACE TOP SOIL LAST
- 11) RIG DOWN AND MOVE OUT ALL EQUIPMENT

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

Signed: _____ Print Name: Aubrey Noonan
Title: Regulatory Analyst Date: _____ Email: regulatory@bonanzacr.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: _____ Expiration Date: _____

<u>COA Type</u>	<u>Description</u>

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
402169534	WELLBORE DIAGRAM
402169535	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)