

FORM
6Rev
05/18State of Colorado
Oil and Gas Conservation Commission

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



DE ET OE ES

Replug By Other Operator

Document Number:

402251957

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: | 5 | Contact Name: | David Andrews |
| Name of Operator: | COLORADO OIL & GAS CONSERVATION | Phone: | (303) 894-2100 x5686 |
| Address: | 1120 LINCOLN ST SUITE 801 | Fax: | |
| City: | DENVER | State: | CO |
| Zip: | 80203 | Email: | david.andrews@state.co.us |
| For "Intent" 24 hour notice required, | | Name: | Schure, Kym |
| | | Tel: | (970) 520-3832 |
| COGCC contact: | | Email: | kym.schure@state.co.us |

| | | | | | | | |
|-------------|---------------------|--|--|----------------------------------------|--------------|-------------|--------------|
| API Number | 05-075-07529-00 | | | Well Number: | 1-A | | |
| Well Name: | MERRITT-STATE (OWP) | | | Location: | QtrQtr: SENW | Section: 32 | Township: 7N |
| | | | | | Range: 51W | Meridian: 6 | |
| County: | LOGAN | | | Federal, Indian or State Lease Number: | | | |
| Field Name: | WILDCAT | | | Field Number: | 99999 | | |

☒ Notice of Intent to Abandon ☐ Subsequent Report of Abandonment

Only Complete the Following Background Information for Intent to Abandon

| | | | |
|-------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|-------------------------------|-------------|
| Latitude: | 40.533131 | Longitude: | -103.096890 |
| GPS Data: | | | |
| Date of Measurement: | | PDOP Reading: | |
| GPS Instrument Operator's Name: | | | |
| Reason for Abandonment: | <input type="checkbox"/> Dry <input type="checkbox"/> Production Sub-economic <input type="checkbox"/> Mechanical Problems | | |
| <input checked="" type="checkbox"/> Other | COGCC OWP Well | | |
| Casing to be pulled: | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Estimated Depth: | |
| 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 |
|-----------|-----------|-----------|----------------|---------------------|------------|
| D SAND | 4668 | 4768 | 10/29/1960 | CEMENT | 160 |
| J SAND | 4768 | 4852 | 10/29/1960 | CEMENT | 160 |

Total: 2 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 | 10+3/4 | 8+5/8 | 28 | 154 | 125 | 154 | 0 | VISU |
| OPEN HOLE | 7+7/8 | | | 4,852 | | | | |

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth _____ with _____ 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 _____ 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: ☐
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

(Cast Iron Cement Retainer Depth)

Set _____ sacks half in. half out surface casing from _____ ft. to _____ ft. Plug Tagged: ☐

Set 20 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 Cut and Cap 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:

This location does not meet reclamation requirements. Well casing remains on location and has not been cut below grade. Scope of work is to ensure cement coverage to surface, cut 4' below grade, and cap well. Also, currently 150 FEET TO HARD TAG, 20 sacks of cement at surface to ensure surface casing cemented from 50' 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: Shannon Chollett

Title: OWP Engineer Date: _____ Email: shannon.chollett@state.co.us

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: _____

COA Type **Description**

| COA Type | Description |
|----------|-------------|
| | |

Attachment Check List

Att Doc Num

Name

402252083

WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

| | | |
|--|--|------------------------|
| | | Stamp Upon Approval |
|--|--|------------------------|

Total: 0 comment(s)