

FORM
6Rev
11/20

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:

402815147

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: 47120

Contact Name: Callie Fiddes

Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP

Phone: (720) 929-4361

Address: P O BOX 173779

Fax:

City: DENVER State: CO Zip: 80217-

Email: Callie_Fiddes@Oxy.com

For "Intent" 24 hour notice required,

Name: Revas, Robbie

Tel: (720) 661-7242

COGCC contact:

Email: robbie.revas@state.co.us

Type of Well Abandonment Report: ☒ Notice of Intent to Abandon ☐ Subsequent Report of Abandonment

API Number 05-123-25349-00

Well Name: ROLAND X

Well Number: 28-4

Location: QtrQtr: NWNW Section: 28 Township: 2N Range: 65W Meridian: 6

County: WELD

Federal, Indian or State Lease Number:

Field Name: WATTENBERG

Field Number: 90750

Only Complete the Following Background Information for Intent to Abandon

Latitude: 40.115016

Longitude: -104.676090

GPS Data: GPS Quality Value: 2.7 Type of GPS Quality Value: PDOP Date of Measurement: 02/07/2008

Reason for Abandonment: ☐ Dry ☒ Production Sub-economic ☐ Mechanical Problems☐ OtherCasing to be pulled: ☒ Yes ☐ No Estimated Depth: 1015Fish in Hole: ☐ Yes ☒ No If yes, explain details belowWellbore 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 |
|-----------|-----------|-----------|----------------|---------------------|------------|
| J SAND | 7700 | 7738 | | | |

Total: 1 zone(s)

Casing History

| Casing Type | Size of Hole | Size of Casing | Grade | Wt/Ft | Csg/Liner Top | Setting Depth | Sacks Cmt | Cmt Btm | Cmt Top | Status |
|-------------|--------------|----------------|-------|------------|---------------|---------------|-----------|---------|---------|--------|
| SURF | 12+1/4 | 8+5/8 | J55 | 24 | 0 | 915 | 473 | 915 | 0 | VISU |
| 1ST | 7+7/8 | 4+1/2 | I80 | 11.6 | 0 | 7790 | 920 | 7790 | 6260 | CBL |
| | | | | Stage Tool | 0 | 5576 | 660 | 5630 | 1950 | CBL |

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 7650 with 2 sacks cmt on top. CIBP #2: Depth 6912 with 2 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 25 sks cmt from 1850 ft. to 1550 ft. Plug Type: CASING Plug Tagged: ☐
Set 75 sks cmt from 250 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: ☐

Perforate and squeeze at 1850 ft. with 85 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 120 sacks half in. half out surface casing from 1015 ft. to 865 ft. Plug Tagged: ☐

Set 75 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

Surface Plug Setting Date: _____ Cut and Cap Date: _____ Number of Days from Setting Surface Plug to Capping or Sealing the Well: _____

*Wireline Contractor: _____

*Cementing Contractor: _____

Type of Cement and Additives Used: _____

Flowline/Pipeline has been abandoned per Rule 1105 ☐ Yes ☐ No

Technical Detail/Comments:

Prior to commencing operations, KMG will post signs in conspicuous locations. The signs will indicate plugging and abandonment operations are being conducted, the well name, well, and the Operator's contact information. Signs will be placed so as not to create a potential traffic hazard.

Courtesy notifications will be sent to all parcel owners within 1,500 feet of the location letting them know about our plugging and abandonment operations and providing contact information for Kerr McGee's response line and online resources.

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

Signed: _____

Print Name: Callie Fiddes

Title: Regulatory Analyst

Date: _____

Email: Callie_Fiddes@Oxy.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: _____

COA Type

Description

| | |
|--|--|
| | |
|--|--|

Attachment List

Att Doc Num

Name

| | |
|-----------|-----------------------------|
| 402815167 | PROPOSED PLUGGING PROCEDURE |
| 402815168 | WELLBORE DIAGRAM |

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

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

Total: 0 comment(s)