

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:

403024065

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: Lindsay Frase

Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP

Phone: (970) 515-1616

Address: P O BOX 173779

Fax:

City: DENVER State: CO Zip: 80217-

Email: Lindsay_Frase@oxy.com

For "Intent" 24 hour notice required,

Name: Carlile, Craig

Tel: (970) 629-8279

COGCC contact:

Email: craig.carlile@state.co.us

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

API Number 05-123-21418-00

Well Name: YOUEL

Well Number: 16-1

Location: QtrQtr: SESE Section: 1 Township: 3N Range: 67W 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: 40.247560

Longitude: -104.831560

GPS Data: GPS Quality Value: 2.5 Type of GPS Quality Value: Date of Measurement: 09/27/2006

Reason for Abandonment: ☐ Dry ☒ Production Sub-economic ☐ Mechanical Problems☐ OtherCasing to be pulled: ☒ Yes ☐ No Estimated Depth: 755Fish 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
CODELL	7288	7298			
NIOBRARA	7001	7066			

Total: 2 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	J-55	24	0	655	540	655	0	VISU
1ST	7+7/8	4+1/2	I-80	11.6	0	7462	225	6325		CBL

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 7230 with 2 sacks cmt on top. CIBP #2: Depth 260 with 80 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 <u>5</u> sks cmt from <u>6971</u> ft. to <u>6910</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input type="checkbox"/>
Set <u>15</u> sks cmt from <u>5100</u> ft. to <u>4900</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input type="checkbox"/>
Set <u>20</u> sks cmt from <u>3760</u> ft. to <u>3500</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input type="checkbox"/>
Set <u>60</u> sks cmt from <u>2800</u> ft. to <u>2000</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input type="checkbox"/>
Set <u>72</u> sks cmt from <u>1800</u> ft. to <u>800</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input type="checkbox"/>

Perforate and squeeze at 7001 ft. with 95 sacks. Leave at least 100 ft. in casing 6971 CICR Depth

Perforate and squeeze at 6000 ft. with 215 sacks. Leave at least 100 ft. in casing 5100 CICR Depth

Perforate and squeeze at 2800 ft. with 165 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 755 ft. to 605 ft. Plug Tagged: ☐

Set 80 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:

Set 80 sacks cement from 260 ft. to 0 ft. in -Plug Type, Casing -Plug Tagged, No

Perforate and squeeze at 1800 ft. with 218 sacks. Leave at least 100 ft. in casing N/A CICR Depth (Cast Iron Cement Retainer)

BMPs

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 with building units 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.

In some cases, wellbore pressure drawdown operations may occur approximately 1-2 days prior to Move In Rig Up (MIRU) of the workover rig. This is conducted to allow for reduced time that the workover rig is needed on location. These operations will be conducted in accordance with Form 4 and/or Form 6 requirements.

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

Signed: _____

Print Name: Lindsay Frase

Title: Regulatory Tech

Date: _____

Email: Lindsay_Frase@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

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Attachment List

Att Doc Num

Name

403024093	PROPOSED PLUGGING PROCEDURE
403024094	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)