

FORM
6Rev
11/20State 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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Replug By Other Operator

Document Number:

403121658

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: 1	Contact Name: Richard Murray
Name of Operator: UNKNOWN	Phone: (970) 989-3092
Address: XXXXXXXXXXXXXXXXXXXX	Fax:
City: XXXXX State: XX Zip:	Email: g.richard.murray@state.co.us
For "Intent" 24 hour notice required, Name: Kellerby, Shaun Tel: (970) 285-7235 COGCC contact: Email: shaun.kellerby@state.co.us	

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

API Number 05-045-06006-00	Well Number: 1
Well Name: VERVA BOWEN (OWP)	
Location: QtrQtr: NENW Section: 3 Township: 5S Range: 92W Meridian: 6	
County: GARFIELD	Federal, Indian or State Lease Number:
Field Name: WILDCAT	Field Number: 99999

Only Complete the Following Background Information for Intent to Abandon

Latitude: 39.647608	Longitude: -107.708316
GPS Data: GPS Quality Value:	Type of GPS Quality Value: Date of Measurement:
Reason for Abandonment: <input type="checkbox"/> Dry <input type="checkbox"/> Production Sub-economic <input type="checkbox"/> Mechanical Problems	
<input checked="" type="checkbox"/> Other 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

Total: 0 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	10+0/1	8+5/8	NA	24	0	75	30	75	0	VISU

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth _____ with _____ 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	25	sks cmt from	1141	ft. to	1041	ft.	Plug Type:	OPEN HOLE	Plug Tagged:	<input type="checkbox"/>
Set	35	sks cmt from	913	ft. to	813	ft.	Plug Type:	OPEN HOLE	Plug Tagged:	<input type="checkbox"/>
Set	50	sks cmt from	125	ft. to	0	ft.	Plug Type:	CASING	Plug Tagged:	<input checked="" type="checkbox"/>
Set		sks cmt from		ft. to		ft.	Plug Type:		Plug Tagged:	<input type="checkbox"/>
Set		sks cmt from		ft. to		ft.	Plug Type:		Plug Tagged:	<input type="checkbox"/>

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. 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:

This is part of a larger OWP Plugging Project.

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

Signed: _____

Print Name: Richard Murray

Title: OWP

Date: _____

Email: g.richard.murray@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: _____

Condition of Approval

COA Type

Description

0 COA

Attachment List

Att Doc Num

Name

403121669

WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

Stamp Upon
Approval

Total: 0 comment(s)