

State of Colorado
Oil and Gas Conservation Commission

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



FOR OGCC USE ONLY

RECEIVED

AUG 26 02

COGCC

WELL ABANDONMENT REPORT

Submit original plus one copy. This form is to be submitted as an intent whenever a plugging is planned on a borehole. The approved intent shall be valid for six months after the approval date; after that period a new intent will be required. After the plugging is complete, this form and one copy shall again be submitted as a subsequent report of the work as actually completed.

OGCC Operator Number: 0005

Name of Operator: N/A Allen Oil & Gas

Address: 1257

City: _____ State: _____ Zip: _____

Contact Name and Telephone

No: _____

Fax: _____

24 hour notice required, contact:



Tel: _____

API Number: 107-5080

OGCC Lease No.: _____

Other wells this lease? ☐ Y ☐ N

Well Name: State #3

Well Number: #3

Location (QtrQtr, Sec, Twp, Rng, Meridian): SE1/4, 18, 6N, 86W

County: ROUIT

Federal, Indian or State Lease Number: _____

Field Name: TOW Cr.

Field Number: _____

Complete the Attachment Checklist

	Oper	OGCC
Wellbore Diagram		
Cement Job Summary		
Wireline Job Summary		

☐ Notice of Intent to Abandon

☒ Subsequent Report of Abandonment

Only Complete the Following Background Information for Intent to Abandon

Reason for Abandonment: ☐ Dry ☒ Production Sub-Economic ☐ Mechanical Problems ☒ Other
Casing to be Pulled: ☐ Yes ☐ No Top of Casing Cement: _____
Fish in Hole: ☐ Yes ☐ No If yes, explain details below: _____
Wellbore has Uncemented Casing Leaks: ☐ Yes ☐ No If yes, explain details below: _____
Details: _____

OPEN HOLE 2760' - 3073'

Current and Previously Abandoned Zones

Formation	Perforations - Top	Perforations - Bottom	Date Abandoned	Method of Isolation (None, Squeezed, BP, Cement, etc.)	Plug Depth

Casing History

Casing String	Casing Size	Casing Depth	Cement Top	Stage Cement Top
<u>Surf</u>	<u>18 3/8</u>	<u>105'</u>	<u>Surf</u>	
<u>production</u>	<u>NO 7" present 5 1/2</u>	<u>2760'</u>	<u>Surf</u>	

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth _____ with _____ sacks cmt on top. CIBP #2: Depth _____ with _____ sacks cmt on top. NOTE: Two (2) sacks cement required on all CIBPs.
Set 75 sks cmt from 3000' ft. to 2600' ft. in ☒ Casing ☐ Open Hole ☐ Annulus
Set 10 sks cmt from 50' ft. to 0' ft. in ☒ Casing ☐ Open Hole ☐ Annulus
Set _____ sks cmt from _____ ft. to _____ ft. in ☐ Casing ☐ Open Hole ☐ Annulus
Set _____ sks cmt from _____ ft. to _____ ft. in ☐ Casing ☐ Open Hole ☐ Annulus
Perforate and squeeze at _____ ft. with _____ sacks Leave at least 100 ft. in casing
Perforate and squeeze at _____ ft. with _____ sacks Leave at least 100 ft. in casing
Perforate and squeeze at _____ ft. with _____ sacks Leave at least 100 ft. in casing
Set _____ sacks half in, half out surface casing from _____ ft. to _____ ft.
Set _____ sacks at surface
Cut four feet below ground level, weld on plate 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.

*Wireline Contractor: _____

Plugging Date: 05-13-02

*Cementing Contractor: Rippy Sales & Service

Type of Cement and Additives Used: _____

Attach Job Summaries. _____

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

Print Name: _____

Signed: _____

Title: _____

Date: _____

OGCC Approved: [Signature]

Title: NWAC

Date: 8-19-02

CONDITIONS OF APPROVAL, IF ANY: _____



COLORADO OIL & GAS CONSERVATION COMMISSION

NORTHWEST REGION INSPECTION REPORT

<input type="checkbox"/> NOTICE OF UNSATISFACTORY INSPECTION				P O BOX 98									
<input checked="" type="checkbox"/> NOTICE OF SATISFACTORY INSPECTION				LOMA, CO 81524 (970)-858-7521									
API No. 05- 107 - 5080				LEASE NAME: Stato #3									
LOCATION: SENE, 18, 6N, 86W				OPERATOR: X/A									
DATE: 8-16-02				INSPECTOR: JAIME ADKINS MOBIL (970)-250-2440									
INSP TYPE	SR	INSP STATUS	PA	PA	N	PASS/FAIL	P F	VIOLATION	Y	N	NOV	Y	N
UIC VIOL TYPE UA <input type="checkbox"/> MI <input type="checkbox"/> OP <input type="checkbox"/> PA <input type="checkbox"/> OT <input type="checkbox"/> TBG/PKR LK <input type="checkbox"/> CSG LK <input type="checkbox"/> ALL UIC VIOLATIONS REQUIRE NOAVS													
Well ID Signs (Rule 210)				Fences (Rule 604/C.(3), 1003.A)									
Production Pits (Rule 902, 903, 904) EARTHEN PITS ONLY				PRODUCED WATER PITS		TOTAL #		OIL ACCUMULATION		<input type="checkbox"/> YES <input type="checkbox"/> NO			
				SKIMMING/SETTLING PITS		TOTAL #		COVERED #		UNCOVERED #			
SENSITIVE AREA <input type="checkbox"/> YES <input type="checkbox"/> NO				SPECIAL PURPOSE PITS		TOTAL #		LINED #		UNLINED #			
				COMMENTS/SIZE									
Tank Battery Equipment (Rule 604)				BURIED OR PARTIALLY BURIED VESSELS : #STEEL #FIBERGLASS #CONCRETE #OTHER									
Fire Walls/Berms/Dikes (Rule 604)													
General Housekeeping (Rule 603.G)													
Spills (Oil/Water) (Rule 908)													
UIC ROUTINE INSPECTION				INJ PRESSURE		PSIG		COMMENTS					
FILL OUT FORM 21				T-C ANN PRESSURE		PSIG							
WHEN WITNESSING MIT				BRHD PRESSURE		PSIG							
Drilling Well/Workover (Rule 315)													
Surface Rehabilitation (Rule 317)				Final rec. complete, landowner will reveg + control weeds per contract.									
Miscellaneous													
CORRECTIVE ACTION REQUIRED:													
Date Corrective Action Required By: Date Remedied:													

This report is a Notice of Inspection. The Commission requires that you correct any deficiencies shown on this report in a timely manner. Failure to comply may result in enforcement action by the Commission.



COLORADO OIL & GAS CONSERVATION COMMISSION

NORTHWEST REGION FIELD INSPECTION REPORT

<input type="checkbox"/> NOTICE OF UNSATISFACTORY INSPECTION		73 Sippelle Dr., Suite J1	
<input type="checkbox"/> NOTICE OF SATISFACTORY INSPECTION		Parachute, CO 81524 970-285-9000	
Date: 5-13-02	Facility ID:	Operator: N/A	
Location: SENE, 18, 6N, 86W		Lease Name: State #3	
API Number: 05 - 107 - 5080		Inspector: JAIME ADKINS Cell: 970-250-2440	
INSP TYPE	INSP STATUS	RECLAM <input type="checkbox"/> PASS <input type="checkbox"/> INTER <input type="checkbox"/>	PASS/FAIL <input type="checkbox"/> P <input type="checkbox"/> F
UIC VIOL TYPE: <input type="checkbox"/> UA <input type="checkbox"/> MI <input type="checkbox"/> OP <input type="checkbox"/> PA <input type="checkbox"/> OT		TBG/PKR LK <input type="checkbox"/>	CSG LK <input type="checkbox"/>
Well ID Signs		Fences Y N	
(Rule 210) Y N		(Rule 603.b.(7), 1002.a)	
Production Pits (Rule 902, 903, 904) EARTHEN PITS ONLY		Produced Water Pits Comments:	
SENSITIVE AREA <input type="checkbox"/> YES <input type="checkbox"/> NO		Total # _____ Oil Accumulation? <input type="checkbox"/> YES <input type="checkbox"/> NO	
		Skimming/Settling Pits Comments:	
		Total # _____ Covered # _____ Uncovered # _____	
		Special Purpose Pits Comments:	
		Total # _____ Lined # _____ Unlined # _____	
Tank Battery Equipment (Rule 604)		BURIED OR PARTIALLY BURIED VESSELS: #STEEL #FIBERGLASS #CONCRETE #OTHER	
Fire Walls/Berms/Dikes (Rule 604.a.(4))			
General Housekeeping (Rule 603.g)			
Spills (Oil/Water) (Rule 906)			
UIC Routine Inspection FILL OUT FORM 21 WHEN WITNESSING MIT		Inj. Pressure _____ Psig T-C Ann. Pressure _____ Psig	
Drilling Well/Workover (Rule 317)		COMMENTS	
Surface Rehabilitation (Rule 1003, 1004)			
Miscellaneous			
CORRECTIVE ACTION REQUIRED:			
Date Corrective Action Required By:		Date Remedied:	

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