



FORM
6
Rev
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:

403066925

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: 81720

Contact Name: Robert Standley

Name of Operator: STANDLEY* ROBERT K DBA OTIS ENERGY

Phone: (907) 520-2861

Address: 315 SOUTH VINE STREET

Fax:

City: OTIS State: CO Zip: 80743

Email: venture2.es@gmail.com

For "Intent" 24 hour notice required, Name: Sherman, Susan Tel: (719) 775-1111

COGCC contact: Email: susan.sherman@state.co.us

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

API Number 05-121-10574-00

Well Name: GEOGLEIN Well Number: 5

Location: QtrQtr: SWSE Section: 13 Township: 2N Range: 49W Meridian: 6

County: WASHINGTON Federal, Indian or State Lease Number:

Field Name: TAP Field Number: 80840

Only Complete the Following Background Information for Intent to Abandon

Latitude: 40.135127 Longitude: -102.801547

GPS Data: GPS Quality Value: Type of GPS Quality Value: Date of Measurement:

Reason for Abandonment: ☐ Dry ☒ Production Sub-economic ☐ Mechanical Problems

☐ Other

Casing to be pulled: ☐ Yes ☒ No Estimated Depth:

Fish in Hole: ☐ Yes ☒ No If yes, explain details below

Wellbore 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
D SAND	3775	3789			

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	NA	24	0	431	259	431	0	VISU
1ST	7+7/8	5+1/2	NA	15	0	3927	135	3927	2850	CBL

Date Run: 3/13/2023 Doc [#403066925] Well Name: GEOGLEIN 5

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Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 3696 with 2 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 <u>5</u> sks cmt from <u>2350</u> ft. to <u>2300</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input type="checkbox"/>
Set <u>5</u> sks cmt from <u>1150</u> ft. to <u>1100</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input type="checkbox"/>
Set <u>60</u> sks cmt from <u>481</u> ft. to <u>0</u> ft.	Plug Type: <u>CASING</u>	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 2400 ft. with 35 sacks. Leave at least 100 ft. in casing 2350 CICR Depth

Perforate and squeeze at 1200 ft. with 35 sacks. Leave at least 100 ft. in casing 1150 CICR Depth

Perforate and squeeze at 481 ft. with 90 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 15 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:

Required:

Wellbore Diagram: 1-Current, 1-Proposed with plugging

File 42 in webforms(needs chrome) when ready to actually plug

Form 6 Subsequent when the well is plugged

Form 44 for flowline abandonment

Form 27 to decommission facilities

Close the pits with appropriate forms

well bore diagram to follow.

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

Signed: _____

Print Name: Robert Standley

Title: Owner

Date: _____

Email: venture2.es@gmail.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: _____

<u>COA Type</u>	<u>Description</u>
	<p>Bradenhead Testing</p> <p>Prior to starting plugging operations a bradenhead test shall be performed if there has not been a reported bradenhead test within the 60 days immediately preceding the start of plugging operations.</p> <p>1) If, before opening the bradenhead valve, the beginning pressure is greater than 25 psi, sampling is required.</p> <p>2) If pressure remains at the conclusion of the test, or if any liquids were present during the test, sampling is required.</p> <p>The Form 17 shall be submitted within 10 days of the test. Sampling shall comply with Operator Guidance - Bradenhead Testing and Reporting Instructions. If samples are collected, copies of all final laboratory analytical results shall be provided to the COGCC within three (3) months of collecting the samples.</p> <p>If there is a need for sampling, contact COGCC engineering for verification of plugging procedure.</p>
1 COA	

Attachment List

<u>Att Doc Num</u>	<u>Name</u>

Total Attach: 0 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)