


FORM 6 Rev 11/20	State of Colorado Energy & Carbon Management Commission				DE	ET	OE	ES																																												
	1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109				Document Number: 403832630  Date Received:																																															
WELL ABANDONMENT REPORT																																																				
<p>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.</p>																																																				
ECMC Operator Number: 61650					Contact Name: Cristina Goodrich																																															
Name of Operator: MURFIN DRILLING COMPANY INC					Phone: (316) 858-8664																																															
Address: 250 N WATER ST STE 300					Fax:																																															
City: WICHITA State: KS Zip: 67202					Email: cgoodrich@murfininc.com																																															
For "Intent" 24 hour notice required,					Name: Welsh, Brian		Tel: (719) 325-6919																																													
ECMC contact:					Email: brian.welsh@state.co.us																																															
Type of Well Abandonment Report: <input checked="" type="checkbox"/> Notice of Intent to Abandon <input type="checkbox"/> Subsequent Report of Abandonment																																																				
API Number 05-009-06383-00																																																				
Well Name: SE CAMPO UNIT Well Number: 405																																																				
Location: QtrQtr: NENE Section: 2 Township: 35S Range: 46W Meridian: 6																																																				
County: BACA Federal, Indian or State Lease Number: 8100																																																				
Field Name: CAMPO Field Number: 9850																																																				
Only Complete the Following Background Information for Intent to Abandon																																																				
Latitude: 37.030930 Longitude: -102.563279																																																				
GPS Data: GPS Quality Value: 3.4 Type of GPS Quality Value: Date of Measurement: 05/01/2009																																																				
Reason for Abandonment: <input type="checkbox"/> Dry <input checked="" type="checkbox"/> Production Sub-economic <input type="checkbox"/> Mechanical Problems																																																				
<input type="checkbox"/> Other																																																				
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																																																				
<table><tr><th>Formation</th><th>Perf. Top</th><th>Perf. Btm</th><th>Abandoned Date</th><th>Method of Isolation</th><th>Plug Depth</th></tr><tr><td>LANSING</td><td>4010</td><td>4015</td><td></td><td></td><td></td></tr></table>									Formation	Perf. Top	Perf. Btm	Abandoned Date	Method of Isolation	Plug Depth	LANSING	4010	4015																																			
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LANSING	4010	4015																																																		
Total: 1 zone(s)																																																				
Casing History																																																				
<table><tr><th>Casing Type</th><th>Size of Hole</th><th>Size of Casing</th><th>Grade</th><th>Wt/Ft</th><th>Csg/Liner Top</th><th>Setting Depth</th><th>Sacks Cmt</th><th>Cmt Btm</th><th>Cmt Top</th><th>Status</th></tr><tr><td>CONDUCTOR</td><td>30</td><td>20</td><td>UNK</td><td>UNK</td><td>0</td><td>23</td><td></td><td>23</td><td>0</td><td>VISU</td></tr><tr><td>SURF</td><td>12+1/4</td><td>8+5/8</td><td>K55</td><td>24</td><td>0</td><td>1561</td><td>800</td><td>1561</td><td>0</td><td>VISU</td></tr><tr><td>1ST</td><td>7+7/8</td><td>5+1/2</td><td>K55</td><td>14</td><td>0</td><td>4252</td><td>175</td><td>4252</td><td>3308</td><td>CBL</td></tr></table>									Casing Type	Size of Hole	Size of Casing	Grade	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top	Status	CONDUCTOR	30	20	UNK	UNK	0	23		23	0	VISU	SURF	12+1/4	8+5/8	K55	24	0	1561	800	1561	0	VISU	1ST	7+7/8	5+1/2	K55	14	0	4252	175	4252	3308	CBL
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## Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 3960 with 5 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 \_\_\_\_\_ 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: ☐  
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 2905 ft. with 45 sacks. Leave at least 100 ft. in casing 2855 CICR Depth  
Perforate and squeeze at 1635 ft. with 350 sacks. Leave at least 100 ft. in casing 1510 CICR Depth  
Perforate and squeeze at \_\_\_\_\_ ft. with \_\_\_\_\_ sacks. Leave at least 100 ft. in casing \_\_\_\_\_ CICR Depth

(Cast Iron Cement Retainer Depth)

Set 220 sacks half in. half out surface casing from 1510 ft. to 0 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 Number of Days from Setting Surface Plug to Capping or Sealing the Well: \_\_\_\_\_  
Surface Plug Setting Date: \_\_\_\_\_ Cut and Cap Date: \_\_\_\_\_

\*Wireline Contractor: \_\_\_\_\_ \*Cementing Contractor: \_\_\_\_\_

Type of Cement and Additives Used: \_\_\_\_\_

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

Technical Detail/Comments:

Location is within Lesser Prairie Chicken Estimated Occupied Range and Lesser Prairie Chicken Connectivity Area; plugging activities will occur outside of the recommended timing stipulations (March 1 - July 15).

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

Signed: \_\_\_\_\_ Print Name: Jessica Donahue  
Title: Compliance Specialist Date: \_\_\_\_\_ Email: jdonahue@ardorenvironmental.com

Based on the information provided herein, this Well Abandonment Report (Form 6) complies with ECMC Rules and applicable orders and is hereby approved.

ECMC Approved: \_\_\_\_\_ Date: \_\_\_\_\_

### CONDITIONS OF APPROVAL, IF ANY LIST

Expiration Date: \_\_\_\_\_

COA Type	Description
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0 COA	
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**ATTACHMENT LIST**

**Att Doc Num**

**Name**

403832633	WELLBORE DIAGRAM
403832634	WELLBORE DIAGRAM

Total Attach: 2 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)