

FORM
6Rev
11/20

State of Colorado

Energy & Carbon Management Commission

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



DE ET OE ES

Replug By Other Operator

Document Number:

404192445

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.

ECMC Operator Number: 34162

Contact Name: Richard Murray

Name of Operator: GILS HOT OIL SERVICE

Phone: (970) 989-3092

Address: P O BOX 418

Fax:

City: STRASBURG State: CO Zip: 80136

Email: G.Richard.Murray@state.co.us

For "Intent" 24 hour notice required,

Name: Ramsey, Scott

Tel: (970) 623-9782

ECMC contact:

Email: scott.ramsey@state.co.us

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

API Number 05-057-06139-00

Well Name: STATE

Well Number: 5 (OWP)

Location: QtrQtr: NWSW Section: 12 Township: 9N Range: 78W Meridian: 6

County: JACKSON

Federal, Indian or State Lease Number: 78/3164-S

Field Name: CANADIAN RIVER

Field Number: 10100

Only Complete the Following Background Information for Intent to Abandon

Latitude: 40.760820

Longitude: -106.105940

GPS Data: GPS Quality Value: 1.9 Type of GPS Quality Value: Date of Measurement: 06/26/2012

Reason for Abandonment: ☐ Dry ☐ Production Sub-economic ☐ Mechanical Problems☒ Other ORPHAN WELL PROGRAMCasing to be pulled: ☐ Yes ☒ No Estimated Depth: 460Fish 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
NIOBRARA	150	462			

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
CONDUCTOR	9+7/8	7	UN	UN	0	83	26	83	0	VISU
1ST	7	5+1/2	UN	UN	0	12	25	7	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 30 sks cmt from 460 ft. to 360 ft. Plug Type: OPEN HOLE Plug Tagged: ☒
Set 30 sks cmt from 133 ft. to 0 ft. Plug Type: ANNULUS 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 _____ 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 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:

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: SOWP Specialist Date: _____ Email: G.Richard.Murray@state.co.us

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

404192471

WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

Stamp Upon
Approval

Total: 0 comment(s)