FORM			State	of Colorado)	Γ	STATE OF COLORADO	DE	ET	OE	ES
6		Oil a	nd Gas Con	servation C	ommission						
Rev 12/05	1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109						OIL&	Document Number:			
		W	ELL ABAND		REPORT	Ľ	<u>I GAS</u>		217	0095	
form shall ag date, after th and the prop A Subseque diagram sho	gain be subr nat period, a posed config ent Report of owing plugs	nitted as a Subseq new intent will be r juration with plugs Abandonment sha that were set and c	uent Report of the actual required. Attachments re set. Il indicate the actual wor	I work completed. The equired with the Intent k completed. Attachm ole, the job summaries	ed on a borehole. After the approved intent shall be v. to Abandon are wellbore d ents required with a Subse from all plugging contract nent.	alid for six months afte iagrams of the current equent Report are a we	the approval configuration	Dat	e Rece 07/19		
OGCC	Operato	r Number:	7800			Contact N	lame: R	ODNE	EY REY	'NOL[DS
Name o	f Operat	tor: BERE	EN CORPORATIO	ON		Phone:	(316) 265-33	311			
Address	s: <u>2</u> 0	20 N BRAME	BLEWOOD STRE	ET		Fax:	(316) 681-47	712			
City:	WIC	CHITA	State: KS	S Zip:	67206	Email:	RSMITH@B	BEREX	xco.co	DM	
For "	Intent" 2	24 hour notio	ce required,	Name: SCHU	RE, KYM		Tel:	(970)	520-38	332	
COGCC contact: Email: kym.schure@state.co.us											
API Nur	mber	05-121-0	09791-00								
Well Na	me:	COO	K			Well N	umber: 1-X				
Locatior	า:	QtrQtr: SE	SE Sect	ion: 12	Township: 48	S Rar	nge: 54W		Merid	ian:	6
County:		WASHIN	GTON	F	ederal, Indian or S	tate Lease Nur	nber:	-		_	
Field Na	ame:	BISON	1		Field Number:	6800					
	X	Notice of	of Intent to A	bandon	🔲 Subs	sequent Re	port of A	ban	donm	nent	
Only Complete the Following Background Information for Intent to Abandon Latitude: 39.711974 Longitude: -103.370557 GPS Data: Date of Measurement: 09/19/2009 PDOP Reading: 4.5 GPS Instrument Operator's Name: Joseph Dugan Reason for Abandonment: Image: Dry Production for Sub-economic Mechanical Problems Image: Other											
Details:											
					eviously Abando						
J SAND		<u>Formation</u>	<u> </u>	verf. Top Perf. 4670 467			Method of Is				<u>g Depth</u> 1630
Total: 1								. 01			
	(•)			C:	asing History						
Casing	Type	Size of Hole	Size of Casing		ot Setting Depth	Sacks Cemer	t Cement B	Bot C	Cement	Тор	Status
SURF		12+1/4	8+5/8	24	114	60	114	+	0		
1ST		7+7/8	5+1/2	14&15.5	4,678	150	4,678	+	3,77	0	

CIBP #1: Dep CIBP #3: Dep CIBP #5: Dep					it and Subs	equent Re	port
	oth <u>4630</u> wi	th2	sack	s cmt on top. CIF	PB #2: Depth	with	sacks cmt on top.
CIBP #5: Dep	th wi	th	sack	s cmt on top. CIF	PB #4: Depth	with	sacks cmt on top.
0.21 // 01 2 0p	th wi	th	sack	s cmt on top.			NOTE: Two(2) sacks cement required on all CIBPs.
Set40	sks cmt from	2500	ft. to	2400 ft.	Plug Type:	OPEN HOLE	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	ft. v	with	sacks. Le	eave at least 100	ft. in casing	CICR Depth
Perforate and	squeeze at	ft. v	with	sacks. Le	eave at least 100	ft. in casing	CICR Depth
Perforate and	squeeze at	ft. v	with	sacks. Le	eave at least 100	ft. in casing	CICR Depth (Cast Iron Cement Retainer Depth)
Set50	sacks half in. h		ace casing	g from 170	ft. to70	_ ft. Plug	Tagged:
Set 15	sacks at surfac						
	below ground level		late		Dry-Hole Marker:	Yes	No
Set	sacks in rat ho	е		Set	sacks ir	n mouse hole	
Casing Recove *Wireline Contr	red:	ft. of		g Information		g Date:	
		od:			*Cementing Cor		
	it and Additives Us ne has been aband		Pulo 1102	Yes	No		*ATTACH JOB SUMMARY
				163			ATTACT SOD SOMMART
Technical Deta	II/Comments:						
I hereby certify	all statements mad	le in this fo	orm are, to	the best of my k	knowledge, true, c	correct, and com	plete.
Signed:				F	Print Name: RICH	IARD R SMITH	
Title: ENGI	NEERING TECHNIC	CIAN	Date:	7/6/2012	Email: R	SMITH@BEREX	(CO.COM
	nformation provide ereby approved.	d herein, tł	nis Well At	pandonment Rep	oort (Form 6) com	plies with COG	CC Rules and applicable
COGCC Appro	oved: SUTPHIN	, DIRK				Da	te: <u>7/23/2012</u>
	OF APPROVAL, I	F ANY:		_		Expiration Da	te: <u>1/22/2013</u>
						Kym.Schure@	

		<u>Attachm</u>	nent Check List	
Att Doc Num	Name			
2170095	FORM 6 INTENT S	SUBMITTED		
2170096	DIRECTIONAL SU			
2170097	WELLBORE DIAG			
Fotal Attach: 3 F				
		Gene	eral Comments	
<u>User Group</u>	<u>Comment</u>	Comment Date		
· · ·				
Total: 0 comme	(-)			