

Form 6A

Operator Meeting

07/19/2022



COLORADO
Oil & Gas Conservation
Commission

Department of Natural Resources

Diane McCoy, P.E.
Engineering Supervisor

Creating a new Form 6A

COGCC **New Form** McCoy, Diane Tools Log Out

Operator: Status: All Form: 06A
Doc: Status[S] Date Create Date
Task: County:
Start: 11/03/2015

Show 50 entries
Showing 1 to 1 of 1 entries

Doc ID	Num	Status	S	Date(S)	Opr Num
o					

Show 50 entries
Showing 1 to 1 of 1 entries

Search:

Available Forms

Show 10 entries

Form	Description
<input type="checkbox"/> 02	02-Permit to Drill
<input type="checkbox"/> 02A	02A-Oil and Gas Location Assessment
<input type="checkbox"/> 02B	02B-Cumulative Impacts Data Identification
<input type="checkbox"/> 02C	02C-Oil & Gas Development Plan (OGDP) Certification
<input type="checkbox"/> 04	04-Sundry Notice
<input type="checkbox"/> 05	05-Drilling Completion Report
<input type="checkbox"/> 05A	05A-Completed Interval Report
<input type="checkbox"/> 06	06-Well Abandonment
<input type="checkbox"/> 06A	06A-Out of Service Designation
<input type="checkbox"/> 07	07-Monthly Report of Operation

1 2 3 4

W/L Name	Task	Attc	Edit	Del	View	Date(C)	Act

Search:

1



Creating a new Form 6A

● Status[S] Date

Available Forms

Show 10 entries

	Form	Description
<input type="checkbox"/>	02	02-Permit to Drill
<input type="checkbox"/>	07	07-Monthly Report of Operation

Form 06A

Operator Num:

Purpose of this Form 6A

Out of Service Designation

Available Forms

Show 10 entries

	Form	Description
<input type="checkbox"/>	02	02-Permit to Drill
<input type="checkbox"/>	07	07-Monthly Report of Operation

Confirmation Create (New Form 06A)

Operator Num: [5]
Purpose: [Out of Service Designation]

Is the above information correct?



Form 6A: Operator & Contact Info Tab

🏠 COGCC

Ver:	0	Form:	06A	DocNum:	403108376	Status:	DRAFT
Operator:	COLORADO OIL & GAS CONSERVATION COMMISSION			W/L Name:			
Created:	7/18/2022 12:30:19 PM			Received:			

Out of Service Designation

Operator & Contact Info | **Out of Service Designation** | Submit | Attachments

OPERATOR INFORMATION

Operator Num: Suff:

Address:

City: State: Zip:

CONTACT INFORMATION

Contact Name: (eg. First Name Last Name)

Phone:

Email:

WELL PLUGGING DATA

The number of Wells the Operator has plugged in the previous 12 months:

EVIDENCE OF FINANCIAL CAPABILITY

Provide evidence that the Operator is financially capable of meeting the timelines required by Rule 434.d.(4) for its Plugging List. (If this space is inadequate, provide as an attachment.)

Operator information automatically completed based off the Operator number supplied during the form creation wizard

Operator must supply contact information

Number of wells plugged in previous 12 months automatically calculated from Form 6SRAs

Operator must supply comment with details



Form 6A: Out of Service Designation Tab

Out of Service Designation

Operator & Contact Info **Out of Service Designation** Submit Attachments

OUT OF SERVICE DESIGNATION

Summary of Wells to be Designated as Out of Service and placed on the Operator's Plugging List

Within 2000' of a School Facility	<input type="text" value="0"/>	Within 2000' of a Residential Building Unit within a Disproportionately Impacted Community	<input type="text" value="0"/>
Within 2000' of a Child Care Center	<input type="text" value="0"/>	Within High Priority Habitat	<input type="text" value="0"/>
Within 2000' of a High Occupancy Building Unit	<input type="text" value="0"/>	Detected Leak on Operator's CDPHE/AQCC Reg 7 Delayed Repair List	<input type="text" value="0"/>
TOTAL NUMBER OF WELLS	<input type="text" value="0"/>	Valid # <input type="text" value="0"/>	Invalid # <input type="text" value="0"/>

Form Submit Date:

Plugging Due Date For Wells:

[Download Template - Wells to be Designated as Out of Service](#) [Import Data](#)

[View - Wells to be Designated as Out of Service](#) [Clear All Data](#)

All of the data displayed on this tab is from the data supplied by the Operator on the template once the template is imported



Form 6A: OOS Designation Template

Wells to be Designated as Out of Service									
API Number (123-12345)	Well Name	Well Number	Date Ceased Production or Utilization (MM/DD/YYYY)	Within 2000' of a School Facility? (Yes/No)	Within 2000' of a Child Care Center? (Yes/No)	Within 2000' of a High Occupancy Building Unit? (Yes/No)	Within 2000' of a Residential Building Unit within a Disproportionately Impacted Community? (Yes/No)	Within High Priority Habitat? (Yes/No)	Detected Leak on Operator's CDPHE/AQCC Reg 7 Delayed Repair List? (Yes/No)

- Each line is for an individual well
- Add all the wells to be designated as Out of Service
- All columns (A-J) must be completed for each well
- The plugging due date is calculated off the number of wells imported on the Form 6A

For Form 6As submitted before January 1, 2024

Number of Wells listed on the Form 6A	Assigned Plugging Due Date
1-10	12/31/2027
11-50	12/31/2028
51-250	12/31/2029
251 or greater	12/31/2030



Form 6A: OOS Designation Template

Out of Service Designation ✕

Total Imported Rows: 9 (valid: 9, invalid: 0) -Only Display Invalid Rows- "X" = NO and a "Check Mark" = YES

Row#	Valid?	API Num	Well Name & Number	Date Ceased Production or Utilization	Within 2000' of a School Facility?	Within 2000' of a Child Care Center?	Within 2000' of a High Occupancy Building Unit?	Within 2000' of a Residential Building Unit within a Disproportionately Impacted Community?	Within High Priority Habitat?	Detected Leak on Operator's CDPHE/AQCC Reg 7 Delayed Repair List?
3	<input type="radio"/>	051-05004	TERRELL (OWP) 1	07/12/2017	✓	✓	✓	✓	✓	✓
4	<input type="radio"/>	029-05005	McKISSOCK (OWP) 1	06/03/2019	✕	✕	✕	✕	✕	✕
5	<input type="radio"/>	043-40085	HW-2919S89W (OWP) 4	07/22/2000	✓	✓	✓	✓	✓	✓
6	<input type="radio"/>	043-40087	ALICE KELLING 1	04/13/2013	✕	✕	✕	✕	✕	✕
7	<input type="radio"/>	013-40010	SAVANNA 5	01/17/2009	✓	✓	✓	✓	✓	✓
8	<input type="radio"/>	103-40663	RMO 2-10	11/27/2020	✓	✓	✓	✓	✓	✓
9	<input type="radio"/>	103-40666	RMO 2-13	08/13/2021	✓	✓	✓	✓	✓	✓
10	<input type="radio"/>	083-06598	ORPHAN WELL B B	04/10/2010	✕	✕	✕	✕	✕	✕
11	<input type="radio"/>	001-40020	DERBY DOME ERF (OWP) 1	10/29/2020	✕	✕	✕	✕	✕	✕

return rows: 9

[Close](#)

After import you will see a pop up of the data imported



Form 6A: Out of Service Designation Tab

Operator & Contact Info | **Out of Service Designation** | Submit | Attachments

OUT OF SERVICE DESIGNATION

Summary of Wells to be Designated as Out of Service and placed on the Operator's Plugging List

Within 2000' of a School Facility	5	Within 2000' of a Residential Building Unit within a Disproportionately Impacted Community	5		
Within 2000' of a Child Care Center	5	Within High Priority Habitat	5		
Within 2000' of a High Occupancy Building Unit	5	Detected Leak on Operator's CDPHE/AQCC Reg 7 Delayed Repair List	5		
TOTAL NUMBER OF WELLS	9	Valid #	9	Invalid #	0

After import you will see a summary of the data you supplied. These data fields cannot be edited directly. If there is an issue, clear the data and then import the correct template spreadsheet data



Form 6A: Submit Tab

Out of Service Designation

Operator & Contact Info

Out of Service Designation

Submit

Attachments

OPERATOR COMMENTS AND SUBMITTAL

Comments:

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

Submitter's Name and Email are the same as CONTACT Name and Email?

Print Name:

Title:

Email:



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