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**McDonald, Jeffrey**

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**From:** Shutt, Doug <Doug.Shutt@Illinois.gov>  
**Sent:** Thursday, August 14, 2014 11:12 AM  
**To:** McDonald, Jeffrey  
**Subject:** Crisswell Plugging Affidavit  
**Attachments:** criswell PA.PDF; criswell completion.pdf

Jeff, here is the completion report and plugging affidavit for the Crisswell permit.

Doug Shutt  
Office of Oil and Gas Resource Management  
One Natural Resources Way  
Springfield, IL 62702  
217 782-7756

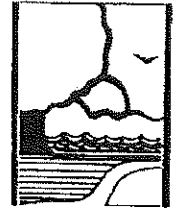




ILLINOIS DEPARTMENT OF NATURAL RESOURCES  
Office of Mines and Minerals

Division of Oil and Gas  
(217) 782-7756

One Natural Resources Way  
Springfield, Illinois 62702/1271

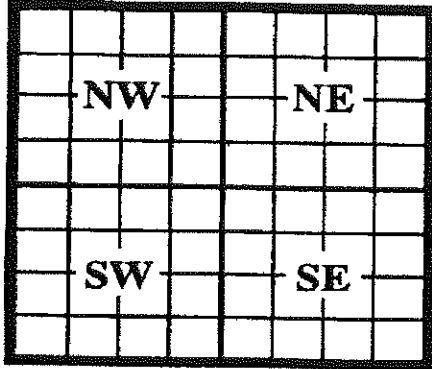


OG-6 WELL PLUGGING REPORT

TYPE OF WELL:  PRODUCTION  CLASS II  GAS STORAGE  REPLUG  OTHER 65

PERMITTEE: Panhandle Eastern PERMITTEE #: 622

WELL NAME: Criswell #1-16 PERMIT #: 1410 REFERENCE #: 203036  
(ISSUE DATE IF NO NUMBER)



COUNTY Morgan  
SECTION 16 TWP 13N RANGE 8W  
LOCATION: 1678 FT. NORTH; OR \_\_\_\_\_  
FT. SOUTH, AND 114 FT. EAST; OR \_\_\_\_\_  
FT. WEST OF THE SW CORNER OF THE SE  
QUARTER OF THE NW QUARTER OF THE \_\_\_\_\_  
QUARTER OF THE \_\_\_\_\_ QUARTER.

WELL DATA:

SURFACE ELEVATION:	<u>671.60</u>	FT.	PRODUCING / INJECTION INTERVALS
TOTAL DEPTH OF WELL	<u>4276</u>	FT.	FROM <u>1861</u> TO <u>1876</u>
PLUGGED BACK TOTAL DEPTH	_____	FT.	FROM <u>3625.6</u> TO <u>3627.6</u>
BASE OF FRESHWATER ZONE	_____	FT.	FROM <u>3642.6</u> TO <u>3646.6</u>
WORKABLE COALS PRESENT AT	_____	FT.	FROM _____ TO _____
DESCRIBE PREVIOUS PLUGBACK PROCEDURE:			
_____			
_____			

DETAILS OF PLUGGING:

FILLED WITH <u>Cement (890 SRS)</u>	FROM <u>4267</u>	TO <u>0</u>	FT.
<small>(ROTARY MUD, WELLBORE FLUID, CEMENT, OR OTHER MATERIALS)</small>			
FILLED WITH _____	FROM _____	TO _____	FT.
FILLED WITH _____	FROM _____	TO _____	FT.
FILLED WITH _____	FROM _____	TO _____	FT.
FILLED WITH _____	FROM _____	TO _____	FT.
FILLED WITH _____	FROM _____	TO _____	FT.
FILLED WITH _____	FROM _____	TO _____	FT.
Comments:			
_____			

WELL DATA:

CASING	SIZE	SETTING DEPTH	SACKS CEMENT	HOLE SIZE	EST. TOP OF CEMENT	AMOUNT OF CASING REMOVED
SURFACE	16	194	220		0	none
INTERMEDIATE/ MINE STRING/OR LINER	12 1/2	1164	400		0	none
PRODUCTION	8 3/8	2690	975		0	none
	5 1/2	4267			0	none

Under penalties of perjury, I declare that I have examined this form including accompanying statements and documents, and to the best of my knowledge, it is true, correct and complete.

Signature of Permittee or Designee

6-14-2014

Date Plugging began

6-16-2014

Address

Date Plugging Completed

City, State, Zip

Inspector present during plugging operations

Inspector Signature

Activity

Date

Inspector Signature

Activity

Date

Inspector Signature

Activity

Date

Inspector not present during plugging operations

Authorization for Inspector not being present

Manager Signature

Date

Plugging information sent to District Office

Inspector site visit to pick up plugging information

Inspector

*Stephen P. ...*

6-18-14

Date



# Cementing Service Report

V2.23

Job Type: Cement Plug

Well Name and Number: Criswell 1-16 (Joachim Obs)		Location (Legal):		Service Date: 6/16/2014		Treatment No: 01-24483 IL	
Pool/Field:		Formation: St. Peter/Joachim (B)/Galesville		Stage:		District:	
County/Parish: Morgan		State: IL		APL No.:		Rig Name: FWS 135CTU	
Customer Name: PANHANDLE EASTERN				Well Data			
Street:		City:		State:		Zip:	
Special Instructions: Plug Well Through Coil Tubing Unit From 1478' To Surface		Bit Size:		CSG/Liner Size: 8 5/8		Total Depth: 1478	
Is Casing/Tubing Secured? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Lift Pressure:		Job Scheduled For:		Weight: 32	
Pressure Limit: 3500		Bump Plug to:		Arrive Location:		Footage: 2604	
Rotate:		Reciprocate:		Left Location:		Grade: J55	
No of Centralizers:		No of Centralizers:		No of Centralizers:		Thread: 8R	
						Less Ft Shoe Jts:	
						Disp. Capacity:	
						Note: Include Footage From Ground Level to Head in Disp. Capacity.	
						Shoe Type: Depth:	
						Float Type: Depth:	
						Stage Tool Type: Depth:	
						Head & Plugs	
						<input type="checkbox"/> Double <input type="checkbox"/> Single <input type="checkbox"/> Swage <input checked="" type="checkbox"/> Knockoff	
						<input checked="" type="checkbox"/> TBG <input type="checkbox"/> D.P. Size: 1 3/4 <input type="checkbox"/> Weight <input type="checkbox"/> Grade <input type="checkbox"/> Thread <input type="checkbox"/> TBG <input type="checkbox"/> D.P.	
						Squeeze Job	
						Tool Type: Depth:	
						Tail Pipe Size: Depth:	
						Tubing Volume:	
						Casing V. Below:	
						Annular Volume:	
						Total Volume:	

TIME	Pressure		Volume Pumped		Inject Rate	Fluid Type	Fluid Density	Service Log Detail	
	TBG/D.P.	Casing	Incram.	Cumulat.				Pre Job Safety Meeting:	
-	-	-	-	-	-	-	-	Brk. Circ.	
9:14	50.0	-	11.0	10.0	0.5	H2O	8.3	St. Cmt.	
9:38	2650.0	-	90.0	101.0	2.0	Cmt	14.0	St. Disp.	
10:26	2500.0	-	13.0	114.0	2.0	H2O	8.3	Shd. Pull Tubing To Surface	
10:32	-	-	-	-	-	-	-	Displace 1 Bbl	
10:37	650.0	-	1.0	115.0	2.0	H2O	8.3		

Remarks:

System Code	No. of Sacks	Yield Cu. FT/SK	Composition of Cementing Systems				Slurry Mixed BBLs Dens.	
1	350.0	1.30	Class A + 1.25% Tic + .6% NFL				81.0	14.5
2								
3								
4								
5								
6								

Breakdown Fluid Type:		Volume:		Density:		Press:		Max:		Min:	
<input type="checkbox"/> Hesitation SQ. <input type="checkbox"/> Running SQ.		Circulation Lost:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Cement Circulated to Surf: N/A				BBLs	
Brkdwn:		Final:		PSI		Displacement Vol: 14 BBLs				Type of Well:	
Web Thru Pts: <input type="checkbox"/> Yes <input type="checkbox"/> No		FT.		<input type="checkbox"/> Measured Displacement <input type="checkbox"/> Wireline		<input type="checkbox"/> Oil <input type="checkbox"/> Storage <input type="checkbox"/> Brine Water		<input checked="" type="checkbox"/> Gas <input type="checkbox"/> Injection <input type="checkbox"/> Wildcat			
Perforations:		to		Instant Shut in Pressure:		Signature of Customer Authorized Agent:		Signature of FWS Representative:			
		to				(before job)		Craig Powden			
		to				(after job)					



GS

ILLINOIS WELL COMPLETION REPORT

INSTRUCTIONS: Within thirty (30) days after the completion of any well, the owner or operator shall transmit to the Oil and Gas Division the Original and one Copy of this form. Upon request, geological information will be kept confidential for one year from the date that permit is issued. A copy of an electric log (if run) and other pertinent information is to be sent to Illinois State Geological Survey, Natural Resources Building, Urbana, Illinois.

Oil \_\_\_\_\_ Gas \_\_\_\_\_ Dry Hole \_\_\_\_\_ SWD \_\_\_\_\_ Water Input \_\_\_\_\_ Gas Input \_\_\_\_\_ Coav. \_\_\_\_\_ Str. Test \_\_\_\_\_

Facility well \_\_\_\_\_ Water Supply \_\_\_\_\_ Observation \_\_\_\_\_

Operator PANHANDLE EASTERN PIPELINE CO. Well Name and No. CRISWELL #1-16

Permit No. 1410 Date Issued 9-21-65 Location 1678'N AND 114'E SWC SE NW

County MORGAN Section 16 Township 13N Range 8W

Elevation: DF \_\_\_\_\_ KB \_\_\_\_\_ Ground 658.09 Total Depth 4253 P.B.T.D. 4253

Date Drilling Began 9/25/65 Date Drilling Completed 11/22/65

Rotary Tools from 0 To 4253 Cable Tools from \_\_\_\_\_ To \_\_\_\_\_

Hole Size 13 3/4", 11", & 7 7/8" Electric or Other Logs Run: Yes  No \_\_\_\_\_ Date 11/22/65

Drilled Out

New Well  Deepened \_\_\_\_\_ Plugged Hole \_\_\_\_\_ Lease Sign Posted: Yes \_\_\_\_\_ No

Was Well Cored: Yes  No \_\_\_\_\_ Drill Stem Test Run: Yes \_\_\_\_\_ No

TUBULAR RECORD

	Size	Depth	Skcs. Cement	Csg. Pulled
Surface	16"	180	220	
Mine or Intermediate	11 3/4"	1150	400	
Producing	8 5/8"	2676	975	
Liner	5 1/2"	2604 - 4253	292	

PRODUCTION INFORMATION

Name of Producing or Injection Formations. \_\_\_\_\_

Date of First Prod. \_\_\_\_\_ Date of Test \_\_\_\_\_ Length of Test \_\_\_\_\_

Daily Production Bbls.: Oil \_\_\_\_\_ Water \_\_\_\_\_ Gas (MCF) \_\_\_\_\_

WELL COMPLETION INFORMATION

Intervals \_\_\_\_\_

Check Type Below:

Perforated \_\_\_\_\_

Shot \_\_\_\_\_

Acidized \_\_\_\_\_

Fractured \_\_\_\_\_

Other \_\_\_\_\_

List Amount Used or Other Details Below:

\*\* Lease signs are being ordered to comply with Department regulations. Electric logs were received by the Mineral Resource Records Section, Urbana, Illinois, on February 4, 1966.

The information given herewith is a correct record of the well and all work done so far as can be determined from all available records.

*W R King*  
Signature

Address

Date

