

FORM 6 Rev 11/20	State of Colorado Oil and Gas Conservation Commission 1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109	 	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">DE</td> <td style="width: 25%;">ET</td> <td style="width: 25%;">OE</td> <td style="width: 25%;">ES</td> </tr> </table> Document Number: <div style="border: 1px solid black; padding: 5px; text-align: center; margin: 5px 0;">402919091</div> Date Received:	DE	ET	OE	ES																													
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WELL ABANDONMENT REPORT																																				
<p><small>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.</small></p>																																				
OGCC Operator Number: <u>100322</u>		Contact Name: <u>Renee Call</u>																																		
Name of Operator: <u>NOBLE ENERGY INC</u>		Phone: <u>(303) 909-6814</u>																																		
Address: <u>1001 NOBLE ENERGY WAY</u>		Fax: _____																																		
City: <u>HOUSTON</u>	State: <u>TX</u>	Zip: <u>77070</u>	Email: <u>renee.call@chevron.com</u>																																	
<div style="border: 1px solid black; padding: 5px;"> For "Intent" 24 hour notice required, </div>																																				
Name: <u>Evins, Bret</u>		Tel: <u>(970) 420-6699</u>																																		
COGCC contact:		Email: <u>bret.evins@state.co.us</u>																																		
Type of Well Abandonment Report: <input checked="" type="checkbox"/> Notice of Intent to Abandon <input type="checkbox"/> Subsequent Report of Abandonment																																				
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<i>Only Complete the Following Background Information for Intent to Abandon</i>																																				
Latitude: <u>40.455375</u> Longitude: <u>-104.595428</u>																																				
GPS Data: GPS Quality Value: <u>3.0</u> Type of GPS Quality Value: <u>PDOP</u> Date of Measurement: <u>08/13/2009</u>																																				
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																																				
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Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 6563 with 2 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 <u>5</u> sks cmt from <u>3510</u> ft. to <u>3460</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input type="checkbox"/>
Set <u>30</u> sks cmt from <u>2400</u> ft. to <u>2000</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input type="checkbox"/>
Set <u>40</u> sks cmt from <u>507</u> ft. to <u>0</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input checked="" type="checkbox"/>
Set _____ sks cmt from _____ ft. to _____ ft.	Plug Type: _____	Plug Tagged: <input type="checkbox"/>
Set _____ sks cmt from _____ ft. to _____ ft.	Plug Type: _____	Plug Tagged: <input type="checkbox"/>

Perforate and squeeze at 3560 ft. with 35 sacks. Leave at least 100 ft. in casing 3510 CICR Depth
Perforate and squeeze at 2500 ft. with 155 sacks. Leave at least 100 ft. in casing 2400 CICR Depth
Perforate and squeeze at 507 ft. with 130 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

Surface Plug Setting Date: _____ Cut and Cap Date: _____ Number of Days from Setting Surface Plug to Capping or Sealing the Well: _____

*Wireline Contractor: _____

*Cementing Contractor: _____

Type of Cement and Additives Used: _____

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

Technical Detail/Comments:

This well is part of the AOC (Order 1V-668) Alt MIT program.
3rd party wildlife surveys will be conducted on this well prior to rigging up for P&A activities.
Notification will be given to any adjacent building unit occupants within a 1000 feet of the wellhead of planned P&A start date.

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

Signed: _____

Print Name: Stephanie Dionne

Title: Operations Tech

Date: _____

Email: stephanie.dionne@chevron.com

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

COGCC Approved: _____

Date: _____

CONDITIONS OF APPROVAL, IF ANY: _____

Expiration Date: _____

COA Type

Description

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Attachment List

Att Doc Num

Name

402919105	WELLBORE DIAGRAM
402919106	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)