

**State of Colorado  
Oil and Gas Conservation Commission**

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**Document Number:**

**403241957**

**Date Received:**

**11/29/2022**

**OUT OF SERVICE DESIGNATION**

**Rule 434.d. Out of Service Designation and Plugging List.** An Operator will designate a Well as Out of Service on a Form 6A, Out of Service Designation, and the Out of Service Well is then placed on the Operator's Plugging List.

**OPERATOR & CONTACT INFORMATION**

|   |   |
|---|---|
| OGCC Operator Number: <u>81480</u>                                | Contact Name and Telephone:             |
| Name of Operator: <u>THOMAS L SPRING LLC</u>                      | Name: <u>Kathleen Spring</u>            |
| Address: <u>7400 E ORCHARD RD STE 106-S</u>                       | Phone: <u>(303) 771-1889</u>            |
| City: <u>GREENWOOD VILLAGE</u> State: <u>CO</u> Zip: <u>80111</u> | Email: <u>kathleenspring3@gmail.com</u> |

**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.)

We have attached a bank statement showing evidence that we are capable of plugging these wells. Our current goal is to plug 3 wells off our Out of Service list in 2023 and 2 wells in 2024.

**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 <u>0</u>              | Within 2000' of a Residential Building Unit within a Disproportionately Impacted Community <u>1</u> |
| Within 2000' of a Child Care Center <u>0</u>            |   |
| Within 2000' of a High Occupancy Building Unit <u>0</u> | Within High Priority Habitat <u>2</u>   |
| TOTAL NUMBER OF WELLS <u>4</u>                          | Detected Leak on Operator's CDPHE/AQCC Reg 7 Delayed Repair List <u>0</u>                           |
| Valid <u>4</u> Invalid <u>0</u>                         |   |

Form Submit Date: 11/29/2022

Plugging Due Date For Wells: 12/31/2027

| # | Inv | API       | 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? |
|---|-----|-----------|--------------------|---------------------------------------|------------------------------------|--------------------------------------|---|---|-------------------------------|---|
| 1 |     | 061-06232 | STARK 1 (A)        | 11/28/2022                            | No                                 | No                                   | No  | No  | Yes                           | No  |
| 2 |     | 061-06702 | KERFOOT 13-27      | 11/28/2022                            | No                                 | No                                   | No  | Yes   | No                            | No  |
| 3 |     | 011-06172 | WOLLERT B 3        | 11/28/2022                            | No                                 | No                                   | No  | No  | No                            | No  |
| 4 |     | 061-06765 | LAKESIDE 1-21      | 11/28/2022                            | No                                 | No                                   | No  | No  | Yes                           | No  |

**OPERATOR COMMENT AND SUBMITTAL**

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.

Print Name: Kathleen Spring Email: kathleenspring3@gmail.com  
Title: Manager Date: 11/29/2022

**Attachment Check List**

| <b><u>Att Doc Num</u></b> | <b><u>Name</u></b>               |
|---------------------------|----------------------------------|
| 403241966                 | EDD-DESIGNATION                  |
| 403241975                 | EVIDENCE OF FINANCIAL CAPABILITY |

Total Attach: 2 Files