

<b>FORM</b> 6 Rev 11/20	<b>State of Colorado</b> <b>Oil and Gas Conservation Commission</b> 1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109		 		DE	ET	OE	ES
	Document Number:  403347600  Date Received:							

**WELL ABANDONMENT REPORT**

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.

OGCC Operator Number: 100322	Contact Name: Abigail Crowder
Name of Operator: NOBLE ENERGY INC	Phone: (713) 659-2263
Address: 2001 16TH STREET SUITE 900	Fax:
City: DENVER State: CO Zip: 80202	Email: abigail.crowder@chevron.com
For "Intent" 24 hour notice required, Name: Burns, Adam Tel: (970) 218-4885 Email: adam.m.burns@state.co.us	
COGCC contact:	

Type of Well Abandonment Report: ☒ Notice of Intent to Abandon ☐ Subsequent Report of Abandonment

API Number 05-123-21434-00	Well Number: 34-19
Well Name: ALOYSIUS C	
Location: QtrQtr: NENW Section: 34 Township: 4N Range: 64W Meridian: 6	
County: WELD	Federal, Indian or State Lease Number:
Field Name: WATTENBERG	Field Number: 90750

*Only Complete the Following Background Information for Intent to Abandon*

Latitude: 40.272600 Longitude: -104.541780

GPS Data: GPS Quality Value: 5.2 Type of GPS Quality Value: Date of Measurement: 08/25/2006

Reason for Abandonment: ☐ Dry ☒ Production Sub-economic ☐ Mechanical Problems

☐ Other

Casing to be pulled: ☐ Yes ☒ No Estimated Depth:

Fish in Hole: ☐ Yes ☒ No If yes, explain details below

Wellbore has Uncemented Casing leaks: ☐ Yes ☒ No If yes, explain details below

Details:

**Current and Previously Abandoned Zones**

Formation	Perf. Top	Perf. Btm	Abandoned Date	Method of Isolation	Plug Depth
CODELL	6864	6877			
NIOBRARA	6590	6670			

Total: 2 zone(s)

**Casing History**

Casing Type	Size of Hole	Size of Casing	Grade	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top	Status
SURF	12+1/4	8+5/8	J55	24	0	451	185	451	0	VISU
1ST	7+7/8	4+1/2	M80	11.6	0	6997	300	6997	4110	CBL

## Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 6540 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>3940</u> ft. to <u>3890</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input type="checkbox"/>
Set <u>35</u> sks cmt from <u>2247</u> ft. to <u>1847</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input type="checkbox"/>
Set <u>50</u> sks cmt from <u>651</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 3900 ft. with 65 sacks. Leave at least 100 ft. in casing 3940 CICR Depth  
Perforate and squeeze at 2347 ft. with 155 sacks. Leave at least 100 ft. in casing 2247 CICR Depth  
Perforate and squeeze at 651 ft. with 160 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.

Please be aware that Form 6 Approval can predate actual rig work by up to several months and that environmental conditions can change quickly over that time. Chevron's Environmental Site Screening Process incorporates full environmental field clearances within 7 days of a scheduled well-work activity once the well is added to the active workover rig schedule. Should sensitive HPH conditions be identified during the screening process, Chevron will delay the work until conditions (nesting) clear and/or consult directly with CPW for guidance and discussion of potential mitigation measures that may be incorporated.

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

Signed: \_\_\_\_\_

Print Name: Sharon Strum

Title: Lead Wells Technical

Date: \_\_\_\_\_

Email: sharon.strum@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: \_\_\_\_\_

<u>COA Type</u>	<u>Description</u>
0 COA	

### Attachment List

<u>Att Doc Num</u>	<u>Name</u>
403347904	WELLBORE DIAGRAM
403347908	WELLBORE DIAGRAM

Total Attach: 2 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)