COLORADO
Oil & Gas Conservation Commission
Department of Natural Resources

Form 3 - Financial Assurance Plan

Summary Information Overview

Form Name:	**Form 3 - Financial Assurance Plan**
Document Number:	**403247813**
Date Submitted:	**1/24/2023**
Date Approved:	**6/15/2023**

Operator Information

- *Operator Number:* **10361**
- *Operator Name:* **PRAIRIE RESOURCES LLC**
- *Operator Address:* **25975 HIGHWAY 14**
- *Operator City:* **AULT**
- *Operator State:* **CO**
- *Operator Zip:* **80610**
- *First Name:* **ROY**
- *Last Name:* **DYER**
- *Contact Phone:* **(970) 454-3784**
- *Contact Email:* **dyerequipment@aol.com**
- *Initial Plan:* ☑
- *Docket Number:* **N/A**
- *Commission Order:*
- *Subsidiary Operators:* ***None***
- *Revised Plan Description:*
- *Operator Transfer Type:*
- *Operator's Total Oil Production:* **46**
- *Operator's Total Gas Production:* **0**
- *Operator's Aggregate GOR:* **0**
- *Operator's GOR Determination:* **BOE**
- *Operator's Average Daily Per-Well Production:* **0.125 BOE**
- *Public Company:* **NO**
- *Current Approved Plan Option:*

Well Data

Well Status Data **Reported Plugged Wells are excluded.**

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Status	Total	With Federal Financial Assurance	Tribal Wells	Subject to Rule 702
Active	0	0	0	0
Active Permit	0	0	0	0
Domestic	0	0	0	0
Drilling	0	0	0	0
Injecting	0	0	0	0
Producing	1	0	0	1
Shut In	0	0	0	0
Suspended Operations	0	0	0	0
Temporarily Abandoned	0	0	0	0
Waiting on Completion	0	0	0	0
TOTALS	**1**	**0**	**0**	**1**

Well Designation Data

Designation	Total	With Federal Financial Assurance	Tribal Wells	Subject to Rule 702
Defined Inactive	0	0	0	0
Noticed Inactive	0	0	0	0
Inactive Exception	0	0	0	0
Out of Service	0	0	0	0
Out of Service Repurposed	0	0	0	0
Low Producing	1	0	0	1

- *Number of Inactive Wells:* **0**
- *Number of Wells Plugged (2022):* **0**
- *Number of Wells Plugged (2021):* **0**
- *Number of Wells Plugged (2020):* **0**
- *Number of Wells Plugged (2019):* **0**
- *Asset Retirement Planning Description:* **We will have the well professionally plugged. We own loaders, dozers, cranes, excavators, semi-trailers including end and belly dumps, and are fully capable of removing equipment, underground pipelines, and reclaiming the site for approximately $20,000.**
- *Plugged Wells Have Not Passed Final Reclamation:*

	Have Not Passed Final Reclamation	Were Covered by Financial Assurance in Previous FA Plan
Reported Plugged (RP) Wells:	0	0
Dry & Abandoned (DA) Wells:	0	0
Plugged & Abandoned (PA) Wells:	0	0
TOTAL:	0	0

FA Types & Bond Riders

- *Surety Bond:* ☑
- *Is Operator's financial assurance partially or entirely provided through one or more bond riders?:* **NO**

Plan Options

- *Financial Assurance Plan Option:* **4**

Financial Assurance for Wells Option 4

- *Operator chooses to use their Demonstrated Costs for Single Well Financial Assurance (SWFA):* ☐
- *Total Number of Wells:* **1**
- *Number of Wells with SWFA:* **1**
- *Amount of SWFA using COGCC Costs:* **$140,000.00**
- *Amount of SWFA using Operator's Demonstrated Costs:* **$60,000.00**
- *Number of Transferred Low Producing Wells with Other Financial Assurance:* **0**
- *Amount of Other Financial Assurance for Transferred Low Producing Wells:* **$0.00**
- *Number of Out of Service Wells with Other Financial Assurance:* **0**
- *Amount of Other Financial Assurance for Out of Service Wells:* **$0.00**
- *Total Amount of Financial Assurance Required Persuant to Rule 702.d.(3).B.:* **$140,000.00**
- *Annual Contribution Amount: 10% of Total Amount:* **$14,000.00**
- *Operator's Modified Annual Contribution Amount:* **$0.00**
- *Operator's Modified Annual Contribution Amount:* **0%**

Other Financial Assurance

- *Number of Centralized E&P Waste Management Facilities with Financial Assurance:* **0**
- *Amount of Financial Assurance for Centralized E&P Waste Management Facilities:* **$0.00**
- *Number of Remediation Projects with Financial Assurance:* **0**
- *Amount of Financial Assurance for Remediation Projects:* **$0.00**
- *Amount of Blanket Financial Assurance for Seismic Operations:* **$0.00**
- *Number of Gas Gathering, Gas Processing, and Underground Gas Storage Facilities:* **0**
- *Amount of Financial Assurance for Gas Gathering, Gas Processing, and Underground Gas Storage Facilities:* **$0.00**
- *Number of Produced Water Transfer Systems:* **0**
- *Amount of Financial Assurance for Produced Water Transfer Systems:* **$0.00**
- *Number of Commercial Disposal Facilities:* **0**
- *Amount of Financial Assurance for Commercial Disposal Facilities:* **$0.00**
- *Amount of Statewide Blanket Surface Owner Protection Bond:* **$0.00**
- *Number of Individual Surface Owner Protection Bonds:* **0**
- *Total Amount of Individual Surface Owner Protection Bonds:* **$0.00**

Operator's Financial Assurance Summary

- *Amount of Financial Assurance Required per Rule 702:* **$14,000.00**
- *Amount of Financial Assurance Required per Rule 703:* **$0.00**
- *Amount of Financial Assurance Required per Rule 704:* **$0.00**
- *Total Amount of Financial Assurance the Operator will provide to the Commission no later than 90 days from the Commission's approval of the Financial Assurance Plan:* **$14,000.00**

Attachments

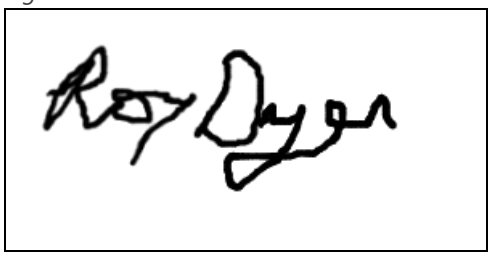
- *Attached Files:*

Doc Num	Attachment name	File name	Uploaded
403299289	CERTIFICATION OF FINANCIAL CAPABILITY	Alliant Westchester Fire Pluging Bond 1-23-2023.pdf	01/23/2023 04:31:41 PM
403349380	SUPPORTING EVIDENCE FOR DEMONSTRATED COSTS	Scanned Operator's Demonstrated Costs Letter 3-17-23.pdf	03/17/2023 09:55:09 PM
403349381	CERTIFICATION OF FINANCIAL CAPABILITY	Financial Assurance Letter COGCC 1-23-2023 P1.pdf	03/17/2023 09:56:06 PM
403434713	NOTICE OF DECISION/COMMISSION ORDER	10361 Prairie Resources LLC Notice of Decision - 403247813.pdf	06/15/2023 10:30:36 AM

Signature and Certification

- *Form Created:* **12/2/2022**
- **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.**

- *Operator Comments:* **I certify we have the financial capability to perform plugging and reclamation of our well in the future.**
- *Name:* **ROY DYER**
- *Title:* **OWNER**
- *Email:* **dyerequipment@aol.com**
- *Phone:* **(970) 454-3784**
- *Signature:*



Associated Documents

- 403299939 - FORM 3 SUBMITTED
- 403349382 - FORM 3 WELL LIST
- 403349383 - FORM 3 INACTIVE WELLS
- 403349384 - FORM 3 OTHER FINANCIAL ASSURANCE
- 403349385 - FORM 3 PLUGGED WELLS HAVE NOT PASSED FINAL RECLAMATION

Conditions of Approval

- The plan is approved as it applies to Financial Assurance associated with the Wells/Facilities identified in the plan. Additional Financial Assurance may be required as the Asset Retirement Plan, inactive well information, and other non-well infrastructure are evaluated further.

General Comments

User Group	Comment	Comment Date
Financial Assurance	Returned to draft per operator request. Demo Cost not provided by operator. Missing information. In addition the CFC file is corrupt.	02/16/2023