


FORM 6 Rev 11/20	State of Colorado Energy & Carbon Management Commission				<table><tr><td>DE</td><td>ET</td><td>OE</td><td>ES</td></tr></table>				DE	ET	OE	ES																													
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1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109				Document Number: 403679006 Date Received:																																					
WELL ABANDONMENT REPORT																																									
<p>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.</p>																																									
OGCC Operator Number: 100322					Contact Name: Gina Arcila																																				
Name of Operator: NOBLE ENERGY INC					Phone: (432) 202-5717																																				
Address: 2001 16TH STREET SUITE 900					Fax:																																				
City: DENVER State: CO Zip: 80202					Email: gina.arcila@chevron.com																																				
For "Intent" 24 hour notice required,					Name: Burns, Adam		Tel: (970) 218-4885																																		
COGCC contact:					Email: adam.m.burns@state.co.us																																				
Type of Well Abandonment Report: <input checked="" type="checkbox"/> Notice of Intent to Abandon <input type="checkbox"/> Subsequent Report of Abandonment																																									
API Number 05-123-23414-00																																									
Well Name: SATER Well Number: 32-13																																									
Location: QtrQtr: SWNE Section: 13 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: 40.313680 Longitude: -104.497260																																									
GPS Data: GPS Quality Value: 1.4 Type of GPS Quality Value: PDOP Date of Measurement: 04/13/2007																																									
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																																									
<table><tr><th>Formation</th><th>Perf. Top</th><th>Perf. Btm</th><th>Abandoned Date</th><th>Method of Isolation</th><th>Plug Depth</th></tr><tr><td>CODELL</td><td>6716</td><td>6728</td><td></td><td></td><td></td></tr></table>									Formation	Perf. Top	Perf. Btm	Abandoned Date	Method of Isolation	Plug Depth	CODELL	6716	6728																								
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CODELL	6716	6728																																							
Total: 1 zone(s)																																									
Casing History																																									
<table><tr><th>Casing Type</th><th>Size of Hole</th><th>Size of Casing</th><th>Grade</th><th>Wt/Ft</th><th>Csg/Liner Top</th><th>Setting Depth</th><th>Sacks Cmt</th><th>Cmt Btm</th><th>Cmt Top</th><th>Status</th></tr><tr><td>SURF</td><td>12+1/4</td><td>8+5/8</td><td>NA</td><td>24</td><td>0</td><td>456</td><td>320</td><td>456</td><td>0</td><td>VISU</td></tr><tr><td>1ST</td><td>7+7/8</td><td>4+1/2</td><td>I80</td><td>11.6</td><td>0</td><td>6866</td><td>110</td><td>6866</td><td>6100</td><td>CBL</td></tr></table>									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	NA	24	0	456	320	456	0	VISU	1ST	7+7/8	4+1/2	I80	11.6	0	6866	110	6866	6100	CBL
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Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 6666 with 2 sacks cmt on top. CIBP #2: Depth 6419 with 2 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 35 sks cmt from 2178 ft. to 1778 ft. Plug Type: CASING Plug Tagged: ☐
Set 50 sks cmt from 656 ft. to 0 ft. Plug Type: CASING Plug Tagged: ☒
Set _____ sks cmt from _____ ft. to _____ ft. Plug Type: _____ Plug Tagged: ☐
Set _____ sks cmt from _____ ft. to _____ ft. Plug Type: _____ Plug Tagged: ☐
Set _____ sks cmt from _____ ft. to _____ ft. Plug Type: _____ Plug Tagged: ☐

Perforate and squeeze at 2278 ft. with 155 sacks. Leave at least 100 ft. in casing 2178 CICR Depth

Perforate and squeeze at 656 ft. with 160 sacks. Leave at least 100 ft. in casing _____ CICR Depth

Perforate and squeeze at _____ ft. with _____ 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:

Previous Form 6 is due to expire on 4/3/24, this is a renewal as scheduled for work in April 2024.

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.

CPW consult not required.

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 Asst

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>
403679016	WELLBORE DIAGRAM
403679017	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)