


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: 403723785 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>																																								
ECMC Operator Number: 100322				Contact Name: Maryam Akbari																																				
Name of Operator: NOBLE ENERGY INC				Phone: (661) 633-4604																																				
Address: 1099 18TH STREET SUITE 1500				Fax:																																				
City: DENVER State: CO Zip: 80202				Email: maryamakbari@chevron.com																																				
For "Intent" 24 hour notice required,				Name: Peterson, Tom		Tel: (970) 370-1281																																		
ECMC contact:				Email: tom.peterson@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 05-123-23795-00																																								
Well Name: GOLDBERG N				Well Number: 14-25																																				
Location: QtrQtr: NESW Section: 14 Township: 5N Range: 67W 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: 40.396110 Longitude: -104.865016																																								
GPS Data: GPS Quality Value: 2.9 Type of GPS Quality Value: PDOP Date of Measurement: 08/22/2006																																								
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 checked="" type="checkbox"/> Yes <input 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: fish - tbg @ 7300'-7302'																																								
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>7158</td><td>7180</td><td>03/28/2022</td><td>CEMENT</td><td>7158</td></tr></table>								Formation	Perf. Top	Perf. Btm	Abandoned Date	Method of Isolation	Plug Depth	CODELL	7158	7180	03/28/2022	CEMENT	7158																					
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CODELL	7158	7180	03/28/2022	CEMENT	7158																																			
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>J55</td><td>24</td><td>0</td><td>455</td><td>320</td><td>455</td><td>0</td><td>VISU</td></tr><tr><td>1ST</td><td>7+7/8</td><td>4+1/2</td><td>M80</td><td>11.6</td><td>0</td><td>7318</td><td>570</td><td>7318</td><td>3660</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	J55	24	0	455	320	455	0	VISU	1ST	7+7/8	4+1/2	M80	11.6	0	7318	570	7318	3660	CBL
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Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth _____ with _____ 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 35 sks cmt from 2222 ft. to 1822 ft. Plug Type: CASING Plug Tagged: ☐
Set 50 sks cmt from 655 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 2322 ft. with 155 sacks. Leave at least 100 ft. in casing 2222 CICR Depth
Perforate and squeeze at 655 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 Number of Days from Setting Surface Plug to Capping or Sealing the Well: _____
Surface Plug Setting Date: _____ Cut and Cap Date: _____

*Wireline Contractor: _____ *Cementing Contractor: _____

Type of Cement and Additives Used: _____

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

Technical Detail/Comments:

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.

ECMC Approved: _____ Date: _____

CONDITIONS OF APPROVAL, IF ANY: _____

Expiration Date: _____

COA Type	Description
0 COA	

Attachment List

Att Doc Num	Name
403723819	WELLBORE DIAGRAM
403723820	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)