


FORM 6 Rev 11/20	State of Colorado Energy & Carbon Management Commission				DE	ET	OE	ES		
	1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109				Replug By Other Operator					
WELL ABANDONMENT REPORT					Document Number: 403802174					
<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>					Date Received:					
ECMC Operator Number: 10670					Contact Name: Mandie Flinn					
Name of Operator: BISON IV OPERATING LLC					Phone: (720) 261-4461					
Address: 518 17TH STREET SUITE 1800					Fax:					
City: DENVER State: CO Zip: 80202					Email: mflinn@bisonog.com					
For "Intent" 24 hour notice required, Name: Petrie, Erica Tel: (303) 726-3822										
ECMC contact: Email: erica.petrie@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 05-123-13370-00										
Well Name: CARVER Well Number: 1										
Location: QtrQtr: SWNE Section: 32 Township: 8N Range: 59W Meridian: 6										
County: WELD Federal, Indian or State Lease Number:										
Field Name: RATTLESNAKE BUTTES Field Number: 72410										
Only Complete the Following Background Information for Intent to Abandon										
Latitude: 40.620455 Longitude: -103.999279										
GPS Data: GPS Quality Value: Type of GPS Quality Value: Date of Measurement:										
Reason for Abandonment: <input type="checkbox"/> Dry <input type="checkbox"/> Production Sub-economic <input type="checkbox"/> Mechanical Problems										
<input checked="" type="checkbox"/> Other Offset Frac Reentry										
Casing to be pulled: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Estimated Depth: 6040										
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										
Formation Perf. Top Perf. Btm Abandoned Date Method of Isolation Plug Depth										
Total: 0 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	24	NA		215	140	215	0	
OPEN HOLE	7+7/8	4+1/2	11.6	NA		6976	150	6976	6555	

## 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 5 sks cmt from 6742 ft. to 6800 ft. Plug Type: OPEN HOLE Plug Tagged: ☐  
Set 100 sks cmt from 5885 ft. to 6185 ft. Plug Type: OPEN HOLE Plug Tagged: ☐  
Set 50 sks cmt from 1452 ft. to 1602 ft. Plug Type: OPEN HOLE 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 \_\_\_\_\_ ft. with \_\_\_\_\_ 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  
Perforate and squeeze at \_\_\_\_\_ ft. with \_\_\_\_\_ sacks. Leave at least 100 ft. in casing \_\_\_\_\_ CICR Depth  
(Cast Iron Cement Retainer Depth)

Set 180 sacks half in. half out surface casing from 544 ft. to 0 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:

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

Signed: \_\_\_\_\_ Print Name: Mandie Flinn  
Title: Operations Tech Date: \_\_\_\_\_ Email: mflinn@bisonog.com

Based on the information provided herein, this Well Abandonment Report (Form 6) complies with ECMC Rules and applicable orders and is hereby approved.

ECMC Approved: \_\_\_\_\_ Date: \_\_\_\_\_

### CONDITIONS OF APPROVAL, IF ANY LIST

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

COA Type	Description
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0 COA	
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**ATTACHMENT LIST**

<b><u>Att Doc Num</u></b>	<b><u>Name</u></b>
403802180	LOCATION PHOTO
403802181	SURFACE OWNER CONSENT
403802182	WELLBORE DIAGRAM
403802183	WELLBORE DIAGRAM
403802184	PROPOSED PLUGGING PROCEDURE

Total Attach: 5 Files

**General Comments**

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

Total: 0 comment(s)