

WELL ABANDONMENT REPORT

Document Number:
 403874735
 Date Received:
 08/01/2024

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.

ECMC Operator Number: 10487 Contact Name: Deborah Abrams
 Name of Operator: SPRINGDALE PARTNERS LLC Phone: (303) 8942100
 Address: 3409 MONTECLAIRE DR Fax: _____
 City: SHERMAN State: TX Zip: 75092 Email: deborah.abrams@state.co.us
For "Intent" 24 hour notice required, Name: Schure, Kym Tel: (970) 520-3832
 ECMC contact: Email: kym.schure@state.co.us

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

API Number 05-075-09268-00
 Well Name: SPRINGDALE UNIT BANEY Well Number: 16-11 (OWP)
 Location: QtrQtr: NESW Section: 16 Township: 8N Range: 53W Meridian: 6
 County: LOGAN Federal, Indian or State Lease Number: 63/59
 Field Name: SPRINGDALE Field Number: 78300

Only Complete the Following Background Information for Intent to Abandon

Latitude: 40.658670 Longitude: -103.308520
 GPS Data: GPS Quality Value: 2.6 Type of GPS Quality Value: _____ Date of Measurement: 12/18/2013
 Reason for Abandonment: Dry Production Sub-economic Mechanical Problems
 Other OWP
 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 |
|-----------|-----------|-----------|----------------|---------------------|------------|
| D SAND | 4774 | 4778 | 09/28/2004 | SQUEEZED | |
| J SAND | 4880 | 4892 | | | |

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 | UNK | 24 | 0 | 664 | 370 | 664 | 0 | VISU |
| 1ST | 7+7/8 | 5+1/2 | UNK | 15.5 | 0 | 5000 | 235 | 5000 | 3750 | CBL |

Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 4805 with 3 sacks cmt on top. CIBP #2: Depth 4699 with 3 sacks cmt on top.
CIBP #3: Depth 3871 with 3 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 10 sks cmt from 1385 ft. to 1285 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:
Set _____ sks cmt from _____ ft. to _____ ft. Plug Type: _____ Plug Tagged:

Perforate and squeeze at 1475 ft. with 40 sacks. Leave at least 100 ft. in casing 1385 CICR Depth

Perforate and squeeze at 100 ft. with 35 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 60 sacks half in. half out surface casing from 770 ft. to 614 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:

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

Signed: _____ Print Name: Deborah Abrams

Title: OWP Date: 8/1/2024 Email: deborah.abrams@state.co.us

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: Wolfe, Stephen

Date: 8/7/2024

CONDITIONS OF APPROVAL, IF ANY LIST

Expiration Date: 2/6/2025

| COA Type | Description |
|----------|--|
| | <p>Bradenhead Testing Prior to starting plugging operations a bradenhead test shall be performed if there has not been a reported bradenhead test within the 60 days immediately preceding the start of plugging operations.</p> <p>1) If, before opening the bradenhead valve, the beginning pressure is greater than 25 psi, sampling is required. 2) If pressure remains at the conclusion of the test, or if any liquids were present during the test, sampling is required.</p> <p>The Form 17 shall be submitted within 10 days of the test. Sampling shall comply with Operator Guidance - Bradenhead Testing and Reporting Instructions. If samples are collected, copies of all final laboratory analytical results shall be provided to the ECMC within three (3) months of collecting the samples.</p> <p>If there is a need for sampling, contact ECMC engineering for verification of plugging procedure.</p> |
| | <p>Operator shall implement measures to control venting, to protect health and safety, and to ensure that vapors and odors from well plugging operations do not constitute a nuisance or hazard to public welfare.</p> |
| | <p>Consistent with Rule 911.a, a Form 27 must be approved prior to cut and cap, conducting flowline abandonment, or removing production equipment. Allow 30 days for Director review of the Form 27; include the Form 27 document number on the Form 44 for offsite flowline abandonment (if applicable) and on the Form 6 Subsequent.</p> |
| | <p>Properly abandon flowlines per Rule 1105. If flowlines will be abandoned in place, include with the Form 27: pressure test results conducted in the prior 12 months as well as identification of any document numbers for a ECMC Spill/Release Report, Form 19, associated with the abandoned line.</p> |

Plugging

- 1) Provide electronic Form 42 Notice of MIRU 2 business days ahead of operations and electronic Form 42 Notice of Plugging Operations 48 hours prior to mobilizing for plugging operations.
- 2) Plugs and squeezes will be placed as stated in the Plugging Procedure section of the approved NOIA unless revised by COA or prior approval from ECMC is obtained.
- 3) The wellbore must be static prior to placing cement plugs which are to be a minimum of 100' in length for all but surface plugs. Mechanical isolation requires a 25' cement plug, minimum. For plugs not specified to be tagged, a tag is required if circulation is not maintained while pumping plug and displacing to depth. Wait on cement(WOC) a minimum of 4 hrs before tagging a plug. Tag at tops specified. Notify ECMC Area Engineer of a high(shallow) tag or before adding cement to a previous plug due to a low (deep) cement top.
- 4) Place a 50' plug (minimum) at the surface, both inside the inner most casing and in all annular spaces. Surface plugs shall be circulated to surface. Confirm cement to surface and complete isolation in all strings during cut and cap. After cut and prior to cap, verify isolation by either a 15 minute bubble test or 15 minute optical gas imaging observation. If there is any indication of flow contact ECMC Engineering before proceeding. Provide a statement on the 6 SRA as to which method was used and what was observed. Retain records of final isolation test for 5 years.
- 5) With the Form 6 SRA operator must provide written documentation which positively affirms each COA has been addressed.
- 6) Operator must wait a sufficient time on all plugs to achieve the intended design. If at any time during the plugging there is evidence of previously unreported pressure or fluid migration, contact ECMC Area Engineer before continuing operations.
- 7) Plugging procedure has been modified as follows,
 Plug #1 - 4805', CIBP, tag and dump 3 sx of cement on top,
 Plug #2 - 4699', CIBP with 3 sx of cement on top,
 Plug #3 - 3871', CIBP with 3 sx of cement on top,
 Plug #4 - 1475', perf and squeeze 40 sx of cement through a CICR set at 1385', spot 10 sx of cement on top of the CICR,
 Plug #5 - 770', perf and circulate 60 sx of cement, displace to 564' , WOC and tag at 614', NOTE: change to depth and volume,
 Plug #6 - 100', perf and circulate 35 sx of cement to the surface,
- 8) Submit any logs run during the plugging with the Form 6 SRA.
- 9) No current Form 17 on file with ECMC. Contact ECMC area engineer with results of pre-plugging bradenhead test for confirmation of plugging procedure prior to commencing plugging operations.

5 COAs

ATTACHMENT LIST

| <u>Att Doc Num</u> | <u>Name</u> |
|---------------------------|-------------------------|
| 403874735 | FORM 6 INTENT SUBMITTED |
| 403874761 | WELLBORE DIAGRAM |

Total Attach: 2 Files

General Comments

| <u>User Group</u> | <u>Comment</u> | <u>Comment Date</u> |
|-------------------|---|---------------------|
| Engineer | Groundwater-High Plains, Upper Pierre Deepest water well- 540'(1mi, 15 records) Log- 075-09254 1/31/1993 GR=4165' UP base 720' | 08/07/2024 |
| Permit | Confirmed as-drilled well location. Production reporting up-to-date. No other forms in process. Confirmed productive interval, docnum: 1162646. Reviewed WBDs. Pass. | 08/05/2024 |
| OGLA | Location Assessment Specialist (LAS) review complete. Well is not in a HPH, not near surface waters or wetlands, and no nearby RBUs. Task passed. | 08/02/2024 |

Total: 3 comment(s)