


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: 403949673 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: 69175				Contact Name: Maryam Akbari																																				
Name of Operator: PDC 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: Evins, Bret		Tel: (970) 420-6699																																		
ECMC contact:				Email: bret.evins@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 05-123-22517-00																																								
Well Name: FRANCIS				Well Number: 11-8																																				
Location: QtrQtr: NWNW Section: 8 Township: 6N 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: 40.506440 Longitude: -104.581970																																								
GPS Data: GPS Quality Value: 3.0 Type of GPS Quality Value: PDOP Date of Measurement: 01/11/2007																																								
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>7036</td><td>7044</td><td></td><td></td><td></td></tr><tr><td>NIOBRARA</td><td>6742</td><td>6883</td><td></td><td></td><td></td></tr></table>								Formation	Perf. Top	Perf. Btm	Abandoned Date	Method of Isolation	Plug Depth	CODELL	7036	7044				NIOBRARA	6742	6883																		
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CODELL	7036	7044																																						
NIOBRARA	6742	6883																																						
Total: 2 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>410</td><td>230</td><td>410</td><td>0</td><td>VISU</td></tr><tr><td>1ST</td><td>7+7/8</td><td>4+1/2</td><td>M65</td><td>10.5</td><td>0</td><td>7232</td><td>500</td><td>7232</td><td>3094</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	410	230	410	0	VISU	1ST	7+7/8	4+1/2	M65	10.5	0	7232	500	7232	3094	CBL
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Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 6694 with 2 sacks cmt on top. CIBP #2: Depth 3597 with 2 sacks cmt on top.
CIBP #3: Depth 2774 with 10 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 75 sks cmt from 955 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: ☐

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 _____ 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:

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.

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 ECMC Rules and applicable orders and is hereby approved.

ECMC Approved: _____

Date: _____

CONDITIONS OF APPROVAL, IF ANY LIST

Expiration Date: _____

<u>COA Type</u>	<u>Description</u>
0 COA	

ATTACHMENT LIST

<u>Att Doc Num</u>	<u>Name</u>
403949796	WELLBORE DIAGRAM
403949798	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)