



<div>FORM 6</div> <div>Rev 11/20</div>	<div>State of Colorado</div> <div>Energy &amp; Carbon Management Commission</div> <div>1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109</div>	<div></div>	<table><tr><td>DE</td><td>ET</td><td>OE</td><td>ES</td></tr></table>	DE	ET	OE	ES																													
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<div>WELL ABANDONMENT REPORT</div> <div><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></div>			<div>Replug By Other Operator</div> <div>Document Number: 404026769</div> <div>Date Received:</div>																																	
<div>ECMC Operator Number: 47120</div> <div>Name of Operator: KERR MCGEE OIL &amp; GAS ONSHORE LP</div> <div>Address: P O BOX 173779</div> <div>City: DENVER State: CO Zip: 80217-</div> <div>Contact Name: Candice Barber</div> <div>Phone: (307) 233-4513</div> <div>Fax:</div> <div>Email: candice_barber@oxy.com</div>																																				
<div>For "Intent" 24 hour notice required, Name: Tel:</div> <div>ECMC contact: Email:</div>																																				
<div>Type of Well Abandonment Report: <input type="checkbox"/> Notice of Intent to Abandon <input checked="" type="checkbox"/> Subsequent Report of Abandonment</div>																																				
<div>API Number 05-123-10345-00</div> <div>Well Name: PHILLIP Well Number: 1</div> <div>Location: QtrQtr: SESW Section: 17 Township: 2N Range: 63W Meridian: 6</div> <div>County: WELD Federal, Indian or State Lease Number:</div> <div>Field Name: WATTENBERG Field Number: 90750</div>																																				
<div>Only Complete the Following Background Information for Intent to Abandon</div> <div>Latitude: 40.132995 Longitude: -104.463661</div> <div>GPS Data: GPS Quality Value: 1.5 Type of GPS Quality Value: PDOP Date of Measurement: 11/20/2024</div> <div>Reason for Abandonment: <input type="checkbox"/> Dry <input type="checkbox"/> Production Sub-economic <input type="checkbox"/> Mechanical Problems</div> <div><input type="checkbox"/> Other</div> <div>Casing to be pulled: <input type="checkbox"/> Yes <input type="checkbox"/> No Estimated Depth:</div> <div>Fish in Hole: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain details below</div> <div>Wellbore has Uncemented Casing leaks: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain details below</div> <div>Details:</div>																																				
<div>Current and Previously Abandoned Zones</div> <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>6817</td><td>7224</td><td></td><td>B PLUG CEMENT TOP</td><td>7100</td></tr></table> <div>Total: 1 zone(s)</div>				Formation	Perf. Top	Perf. Btm	Abandoned Date	Method of Isolation	Plug Depth	CODELL	6817	7224		B PLUG CEMENT TOP	7100																					
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Date Run: 12/12/2024 Doc [#404026769] Well Name: PHILLIP 1

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## Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 7100 with 5 sacks cmt on top. CIBP #2: Depth 268 with 84 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 <u>285</u> sks cmt from <u>6419</u> ft. to <u>5482</u> ft.	Plug Type: <u>OPEN HOLE</u>	Plug Tagged: <input checked="" type="checkbox"/>
Set <u>285</u> sks cmt from <u>3967</u> ft. to <u>3720</u> ft.	Plug Type: <u>OPEN HOLE</u>	Plug Tagged: <input checked="" type="checkbox"/>
Set <u>285</u> sks cmt from <u>2630</u> ft. to <u>1938</u> ft.	Plug Type: <u>OPEN HOLE</u>	Plug Tagged: <input checked="" type="checkbox"/>
Set <u>285</u> sks cmt from <u>1780</u> ft. to <u>1250</u> ft.	Plug Type: <u>OPEN HOLE</u>	Plug Tagged: <input checked="" type="checkbox"/>
Set _____ sks cmt from _____ ft. to _____ ft.	Plug Type: _____	Plug Tagged: <input type="checkbox"/>

Perforate and squeeze at \_\_\_\_\_ ft. with \_\_\_\_\_ sacks. Leave at least 100 ft. in casing \_\_\_\_\_ CICR Depth  
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(Cast Iron Cement Retainer Depth)

Set 440 sacks half in. half out surface casing from 979 ft. to 270 ft. Plug Tagged: ☒

Set 84 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: 24  
Surface Plug Setting Date: 10/27/2024 Cut and Cap Date: 11/20/2024

\*Wireline Contractor: NEXTIER

\*Cementing Contractor: AXIS

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: Candice Barber

Title: REG ANALYST

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

Email: DJREGULATORY@OXY.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

COA Type	Description
0 COA	

**ATTACHMENT LIST**

<b><u>Att Doc Num</u></b>	<b><u>Name</u></b>
404026795	OPERATIONS SUMMARY
404026798	CEMENT JOB SUMMARY
404026799	OTHER
404026800	WELLBORE DIAGRAM
404026802	GYRO SURVEY
404026803	WIRELINE JOB SUMMARY

Total Attach: 6 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)