



FORM 6 Rev 11/20	State of Colorado Energy & Carbon Management Commission 1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109		 		DE	ET	OE	ES																																												
					Replug By Other Operator																																															
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>																																																				
<div>ECMC Operator Number: 10261Contact Name: Sterling Metzger</div> <div>Name of Operator: BAYSWATER EXPLORATION & PRODUCTION LLCPhone: (330) 605.2231</div> <div>Address: 730 17TH ST STE 500Fax:</div> <div>City: DENVERState: COZip: 80202Email: smetzger@bayswater.us</div> <div>For "Intent" 24 hour notice required, Name: Serna, AbeTel: (720) 661-7317</div> <div>ECMC contact: Email: abe.serna@state.co.us</div>																																																				
Type of Well Abandonment Report: <input checked="" type="checkbox"/> Notice of Intent to Abandon <input type="checkbox"/> Subsequent Report of Abandonment																																																				
<div>API Number 05-123-05433-00</div> <div>Well Name: FRANK BAIAMONTEWell Number: 2</div> <div>Location: QtrQtr: SWNWSection: 6Township: 7NRange: 66WMeridian: 6</div> <div>County: WELDFederal, Indian or State Lease Number:</div> <div>Field Name: BLACK HOLLOWField Number: 6835</div>																																																				
Only Complete the Following Background Information for Intent to Abandon																																																				
<div>Latitude: 40.605230Longitude: -104.828470</div> <div>GPS Data: GPS Quality Value: 1.0Type of GPS Quality Value: PDOPDate of Measurement: 01/27/2025</div> <div>Reason for Abandonment: <input type="checkbox"/> Dry<input type="checkbox"/> Production Sub-economic<input type="checkbox"/> Mechanical Problems</div> <div><input checked="" type="checkbox"/> Other Offset remediation</div> <div>Casing to be pulled: <input type="checkbox"/> Yes<input checked="" type="checkbox"/> NoEstimated Depth:</div> <div>Fish in Hole: <input type="checkbox"/> Yes<input checked="" type="checkbox"/> NoIf yes, explain details below</div> <div>Wellbore has Uncemented Casing leaks: <input type="checkbox"/> Yes<input checked="" type="checkbox"/> NoIf yes, explain details below</div> <div>Details:</div>																																																				
Current and Previously Abandoned Zones																																																				
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Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 7880 with 2 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 20 sks cmt from 6850 ft. to 6750 ft. Plug Type: CASING Plug Tagged: ☐
Set 300 sks cmt from 1490 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 6859 ft. with 55 sacks. Leave at least 100 ft. in casing 6850 CICR Depth

Perforate and squeeze at 1500 ft. with 375 sacks. Leave at least 100 ft. in casing 1490 CICR Depth

Perforate and squeeze at _____ ft. with _____ sacks. Leave at least 100 ft. in casing _____ CICR Depth

(Cast Iron Cement Retainer Depth)

Set 315 sacks half in. half out surface casing from 1790 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

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:

This is a 'Re-plug by Other Operator' to adequately re-plug prior to hydraulic fracturing treatment of Opal pad wells. Well records limited to available ECMC records. Originally P&A'd 06/1973. No CBL on file.

Procedure:

- * Bayswater will utilize a closed loop system
- * Using 20% excess cement calculation for openhole plugs and squeezes, API Class G cement base
- 1. Secure permission to access area and identify prospective locations via survey data
- 2. Verify well location with metal detector
- 3. Excavate well, excavate area around well to sufficient size for safe access of casing, verify casing size, cut off cap, weld on slip collar w/ wellhead and riser
- 4. File Form 42 notification at least 2 days prior to P&A ops
- 5. Familiarize all personnel with allowed access to location and areas allowed to be disturbed
- 6. MIRU rig, BOPE, water based fluids with closed-loop recirculating returns system. Test same.
- 7. Make up BHA consisting of: bit, drill collars and work string.
- 8. TIH and drill out previous cement surface plug (estimated surface-65')
- 9. Pressure test casing and verify that no fluid (liquid and gas) migration exists. If there is any evidence of compromised casing, fluid migration or pressure, contact ECMC to verify update to plugging orders before continuing.
- 10. TOOH and lay down BHA.
- 11. RIH w/CIBP and set at 7880' for Dakota isolation. Dump bail 2 sx on top. POOH.
- 12. RIH and perforate squeeze holes at 6859'. POOH.
- 13. RIH and set cement retainer at 6850'. POOH.
- 14. TIH, sting into retainer, establish circulation. MIRU cementers and pump 55 sx squeeze, sting out, leaving an additional 20 sx on top of retainer for Niobrara isolation (pump a total of 75 sx). TOOH to at least 100' above top of cement and circulate clean. TOOH.
- 15. RIH and perforate squeeze holes at 1500'. POOH.
- 16. RIH and set cement retainer at 1490'. POOH
- 17. TIH, sting into retainer, establish circulation. If circulation cannot be established, contact ECMC to verify update to plugging orders. MIRU cementers and pump 375 sx squeeze (or until cement returns to surface), sting out, leaving an additional 300 sx on top of retainer (or as necessary to achieve balanced plug to surface) for Upper Pierre, aquifer, shoe, and surface plug. Top off as necessary and RDMO cementers.
- 18. TOOH and laydown workstring.
- 19. RDMO rig and supporting equipment. Tidy location and prep for reclamation
- 20. Wait at least 5 days, verify TOC is within 5' of surface. Verify successful plugging. Excavate and cut off casing, and weld on cap with full legal description welded onto plate. Back fill hole.
- 21. Submit Form 6 Subsequent and Form 42 for completion of COA after downhole operations complete and reclaim location.

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

Signed: _____ Print Name: Jeanell Ries
Title: Consultant Engineer Date: _____ Email: jgr@s-companies.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
0 COA	

ATTACHMENT LIST

Att Doc Num	Name
404052478	SURFACE OWNER CONSENT
404112305	LOCATION PHOTO
404112306	WELLBORE DIAGRAM

Total Attach: 3 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Return to DRAFT - Provide missing Technical Details/Comments & Correct Location Photos - Verified Completed Interval (198984)	02/13/2025

Total: 1 comment(s)