

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



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Replug By Other Operator

Document Number:

404463118

Date Received:

WELL ABANDONMENT REPORT

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: 10633 Contact Name: Trey Sloan
 Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLC Phone: (918) 534-6637
 Address: 555 17TH STREET SUITE 3700 Fax: _____
 City: DENVER State: CO Zip: 80202 Email: tsloan@civiresources.com

For "Intent" 24 hour notice required, Name: _____ Tel: _____
 Email: _____

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

API Number 05-005-06772-00
 Well Name: BURLINGTON NRTHRN Well Number: 1
 Location: QtrQtr: SESE Section: 8 Township: 5S Range: 64W Meridian: 6
 County: ARAPAHOE Federal, Indian or State Lease Number: _____
 Field Name: WILDCAT Field Number: 99999

Only Complete the Following Background Information for Intent to Abandon

Latitude: 39.625050 Longitude: -104.568767
 GPS Data: GPS Quality Value: _____ Type of GPS Quality Value: PDOP Date of Measurement: 11/19/2025
 Reason for Abandonment: Dry Production Sub-economic Mechanical Problems
 Other _____
 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

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	N/A	24	0	167	100	167	0	VISU
1ST LINER	8+5/8	7	P-110	32	0	208	88	208	0	VISU
OPEN HOLE	7+7/8				100	8502				

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	105	sks cmt from	7715	ft. to	7516	ft.	Plug Type: OPEN HOLE	Plug Tagged: <input checked="" type="checkbox"/>
Set	30	sks cmt from	7516	ft. to	7450	ft.	Plug Type: OPEN HOLE	Plug Tagged: <input type="checkbox"/>
Set	100	sks cmt from	3205	ft. to	2870	ft.	Plug Type: OPEN HOLE	Plug Tagged: <input checked="" type="checkbox"/>
Set	440	sks cmt from	2226	ft. to	716	ft.	Plug Type: OPEN HOLE	Plug Tagged: <input checked="" type="checkbox"/>
Set	726	sks cmt from	716	ft. to	208	ft.	Plug Type: OPEN HOLE	Plug Tagged: <input type="checkbox"/>

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
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(Cast Iron Cement Retainer Depth)

Set 35 sacks half in. half out surface casing from 197 ft. to 0 ft. Plug Tagged:
 Set 10 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: 10/30/2025 Cut and Cap Date: 11/19/2025 Number of Days from Setting Surface Plug to Capping or Sealing the Well: 20

*Wireline Contractor: N/A *Cementing Contractor: Axis

Type of Cement and Additives Used: G Neat, 1K E-Thixo

Flowline/Pipeline has been abandoned per Rule 1105 Yes No

Technical Detail/Comments:

Plugging Procedure Cont'd
5sx of cement from 208' to 197', Plug Type Casing, Plug Tagged

After initial pressure test, ECMC Area Engineer was contacted and a new plan was devised. See attached correspondence.

Venting health and safety precautions were taken to avoid nuisance and or hazards to the public.

Operator used secondary containment for all tanks and other liquid containment.

The GPS data within the form has been updated to reflect as-drilled well location.

Form 42 was submitted prior to plugging operations, Form 42 Doc #404396090. Form 42 was submitted prior to MIRU for plugging operations, Form 42 Doc #404396096.

No fluids or gas migration was present prior to surface casing shoe plug being set. Surface casing shoe plug was placed from 716'-197' with 731 sks and an additional plug placed from 197'-Surface with 45 sks.

At least 100' of cement was left in the wellbore for each plug.

After cut prior to cap, Operator verified isolation by a 15 minute bubble test and no flow was observed.

This form 6-SRA addresses all COA's from the Form 6-NOIA.

Attached to this form:

1. Cement tickets
2. Operations summary
3. Final P&A WBD
4. ECMC Correspondence

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

Signed: _____

Print Name: Aubrey Noonan

Title: Sr. Regulatory Analyst

Date: _____

Email: regulatory@civiresources.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

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

ATTACHMENT LIST

<u>Att Doc Num</u>	<u>Name</u>
404463243	CORRESPONDENCE
404466758	OPERATIONS SUMMARY
404466759	WELLBORE DIAGRAM
404475213	CEMENT JOB SUMMARY

Total Attach: 4 Files

General Comments

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

Total: 0 comment(s)