

Replug By Other Operator

Document Number:
404479479

Date Received:
12/23/2025

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 05-005-06988-00
 Well Name: STATE-EAGLE Well Number: 17-1
 Location: QtrQtr: NENE Section: 17 Township: 5S Range: 64W Meridian: 6
 County: ARAPAHOE Federal, Indian or State Lease Number: 90/7008-S
 Field Name: LOWRY Field Number: 52075

Only Complete the Following Background Information for Intent to Abandon

Latitude: 39.621446 Longitude: -104.568922
 GPS Data: GPS Quality Value: 0.0 Type of GPS Quality Value: PDOP Date of Measurement: 12/11/2025

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	271	220	271	0	VISU
OPEN HOLE	7+7/8				271	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	80	sks cmt from	8505	ft. to	8290	ft.	Plug Type:	OPEN HOLE	Plug Tagged:	<input type="checkbox"/>
Set	100	sks cmt from	4365	ft. to	3973	ft.	Plug Type:	OPEN HOLE	Plug Tagged:	<input checked="" type="checkbox"/>
Set	110	sks cmt from	3200	ft. to	2700	ft.	Plug Type:	OPEN HOLE	Plug Tagged:	<input checked="" type="checkbox"/>
Set	450	sks cmt from	2205	ft. to	1117	ft.	Plug Type:	OPEN HOLE	Plug Tagged:	<input checked="" type="checkbox"/>
Set	70	sks cmt from	184	ft. to	0	ft.	Plug Type:	CASING	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
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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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 580 sacks half in. half out surface casing from 1117 ft. to 184 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: 11/19/2025 Cut and Cap Date: 12/11/2025 Number of Days from Setting Surface Plug to Capping or Sealing the Well: 22

*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:

ECMC staff was contacted with proposed procedure changes due to fish downhole. Plug at 4365' was approved via email. See attached correspondence.

Gyro test was run on 11/18/2025. See attached survey.

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 #404427870. Form 42 was submitted prior to MIRU for plugging operations, Form 42 Doc #404427872.

No fluids or gas migration was present prior to surface casing shoe plug being set. Surface casing shoe plug was placed from 1117'-184' with 580 sks and an additional plug placed from 184'-Surface with 70 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
5. Gyro test

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: 12/23/2025 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: Jacobson, Eric Date: 12/23/2025

CONDITIONS OF APPROVAL, IF ANY LIST

COA Type	Description
0 COA	

ATTACHMENT LIST

Att Doc Num	Name
404479479	WELL ABANDONMENT REPORT (SUBSEQUENT)
404479570	CORRESPONDENCE
404479571	GYRO SURVEY
404484023	WELLBORE DIAGRAM
404484024	OPERATIONS SUMMARY
404484034	CEMENT JOB SUMMARY
404484905	FORM 6 SUBSEQUENT SUBMITTED

Total Attach: 7 Files

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)