



## Form 3 - Financial Assurance Plan

### Summary Information Overview

Form Name: **Form 3 - Financial Assurance Plan**  
Document Number: **404284258**  
Date Submitted: **7/17/2025**

### Operator Information

**Operator Number:** 37230  
**Operator Name:** HALDE OIL INC  
**Operator Address:** 46321 HWY 24 ATTN: KERRY W. HALDE  
**Operator City:** BURLINGTON  
**Operator State:** CO  
**Operator Zip:** 80807  
**First Name:** Kerry  
**Last Name:** Halde  
**Contact Phone:** (719) 346-0352  
**Contact Email:** haldesandandgravel@gmail.com  
**Initial Plan:**   
**Revised Plan:**   
**Docket Number:**  
**Commission Order:**  
**Subsidiary Operators:** None  
**Revised Plan Description:**  
**Operator Transfer Type:** N/A  
**Operator's Total Oil Production:** 3,004  
**Operator's Total Gas Production:** 1,589  
**Operator's Aggregate GOR:** 528.96  
**Operator's GOR Determination:** BOE  
**Operator's Average Daily Per-Well Production:** 2.23 BOE  
**Public Company:** NO  
**Current Approved Plan Option:**

### Well Data

Well Status Data      Reported Plugged Wells are excluded.

Status	Total	With Federal Financial Assurance	Tribal Wells	Subject to Rule 702
Active	0	0	0	0
Active Permit	0	0	0	0
Domestic	0	0	0	0
Drilling	0	0	0	0
Injecting	1	0	0	1
Producing	3	0	0	3
Shut In	1	0	0	1
Suspended Operations	0	0	0	0
Temporarily Abandoned	0	0	0	0
Waiting on Completion	0	0	0	0
TOTALS	5	0	0	5

## Well Designation Data

Designation	Total	With Federal Financial Assurance	Tribal Wells	Subject to Rule 702
Defined Inactive	0	0	0	0
Noticed Inactive	0	0	0	0
Inactive Exception	0	0	0	0
Out of Service	0	0	0	0
Out of Service Repurposed	0	0	0	0
Low Producing	1	0	0	1

**Number of Inactive Wells:** 0

**Number of Wells Plugged (2025):** 2

**Number of Wells Plugged (2024):** 0

**Number of Wells Plugged (2023):** 0

**Number of Wells Plugged (2022):** 0

**Asset Retirement Planning Description:** Halde has plugged and abandoned two (2) wells in 2025; Jagee #1 (API No. 05-061-06584) and Mayer 12-2 #1 (API No. 05-061-06708). Halde anticipates the life expectancy of its producing wells to exceed twenty (20) years. This calculation is based on historical production, estimated reserves, and associated decline curves. Under the ECMC's definition, Halde has one (1) well that is defined by ECMC rules as low producing, but the well is currently Shut In. All of Halde's wells are in eastern Colorado, in Cheyenne county. Halde's equipment ranges in age from fifteen (15) to thirty (30) years and is regularly maintained, replaced, or repaired. When the wells have reached the end of their useful life, Halde will act as a prudent Operator and plug, abandon, and reclaim the wells and associated locations in compliance with ECMC requirements.

### Plugged Wells Have Not Passed Final Reclamation:

	Have Not Passed Final Reclamation	Were Covered by Financial Assurance in Previous FA Plan
Reported Plugged (RP) Wells:	2	2
Dry & Abandoned (DA) Wells:	0	0
Plugged & Abandoned (PA) Wells:	0	0
TOTAL:	2	2

## FA Types & Bond Riders

Cash Bond:

Surety Bond:

Is Operator's financial assurance partially or entirely provided through one or more bond riders?: NO

## Plan Options

Financial Assurance Plan Option: 3

## Financial Assurance for Wells Option 3

Operator's Demonstrated Costs

TVD <= 4,000 ft:

\$ 10,000.00

TVD > 4,000 & <= 8,000 ft:

\$ 30,000.00

TVD > 8,000 ft:

\$ 40,000.00

Location Reclamation Cost:

\$ 8,830.00

Operator chooses to use their Demonstrated Costs for Single Well Financial Assurance (SWFA):

Total Number of Wells: 5

Number of Wells with SWFA: 5

Amount of SWFA using ECMC Costs: \$650,000.00

Amount of SWFA using Operator's Demonstrated Costs: \$194,150.00

Number of Transferred Low Producing Wells with Other Financial Assurance: 0

Amount of Other Financial Assurance for Transferred Low Producing Wells: \$0.00

Number of Out of Service Wells with Other Financial Assurance: 0

Amount of Other Financial Assurance for Out of Service Wells: \$0.00

Total Amount of Financial Assurance Required Pursuant to Rule 702.d.(3).B.: \$194,150.00

Annual Contribution Amount: 5% of Total Amount: \$9,707.50

Operator's Modified Annual Contribution Amount: \$0.00

Operator's Modified Annual Contribution Amount: 0%

## Other Financial Assurance

Number of Centralized E&P Waste Management Facilities with Financial Assurance: 0

Amount of Financial Assurance for Centralized E&P Waste Management Facilities: \$0.00

Number of Remediation Projects with Financial Assurance: 0

Amount of Financial Assurance for Remediation Projects: \$0.00

Amount of Blanket Financial Assurance for Seismic Operations: \$0.00

Number of Gas Gathering, Gas Processing, and Underground Gas Storage Facilities: 0

Amount of Financial Assurance for Gas Gathering, Gas Processing, and Underground Gas Storage Facilities: \$0.00

Number of Produced Water Transfer Systems: 0

Amount of Financial Assurance for Produced Water Transfer Systems: \$0.00

Number of Commercial Disposal Facilities: 0

Amount of Financial Assurance for Commercial Disposal Facilities: \$0.00

Amount of Statewide Blanket Surface Owner Protection Bond: \$0.00

**Number of Individual Surface Owner Protection Bonds:** 6

**Total Amount of Individual Surface Owner Protection Bonds:** \$24,000.00

## Operator's Financial Assurance Summary

**Amount of Financial Assurance Required per Rule 702:** \$9,707.50

**Amount of Financial Assurance Required per Rule 703:** \$0.00

**Amount of Financial Assurance Required per Rule 704:** \$0.00

**Total Amount of Financial Assurance the Operator will provide to the Commission no later than 90 days from the Commission's approval of the Financial Assurance Plan:** \$9,707.50

## Attachments

### Attached Files:

Doc Num	Attachment name	File name	Uploaded
404284465	CERTIFICATION OF FINANCIAL CAPABILITY	Finanical Capability.pdf	07/17/2025 03:46:45 PM
404284561	SUPPORTING EVIDENCE FOR DEMONSTRATED COSTS - CONFIDENTIAL	Halde Demonstrated Cost_Confidential.pdf	07/17/2025 04:03:24 PM
404284596	SUPPORTING EVIDENCE FOR DEMONSTRATED COSTS - REDACTED	Halde Demonstrated Cost_Redacted.pdf	07/17/2025 04:08:04 PM

## Signature and Certification

**Form Created:** 7/17/2025

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

**Operator Comments:** Halde is submitting the revised Financial Assurance Plan to address Conditions of Approval ("COA") per Form 3A, Document No. 404185690 along with providing demonstrated reclamation costs for its five (5) wells; three (3) producing, one (1) shut in, and one (1) injection well. This plan provides supplemental documentation that will confirm the demonstrated costs per ECMC rules and Halde's applicability to ECMC Rule 704 Surface Use Bonds. The Bill 34-26 #4 (API No. 05-017-07024), Wexford #1 (API No. 05-017-07558) and Mitchell 41-35 #1 (API No. 05-017-06939) all have Surface Use agreements in place, attached. The Bill 23-26 #2 (API No. 05-017-07003) and Noreen 13-2 #1 (API No. 05-017-07063) will require a \$4000.00 Surface Bond as each of these locations are on non-irrigated lands.

**Name:** Kerry Halde

**Title:** President

**Email:** haldesandandgravel@gmail.com

**Phone:** (719) 346-0352

**Signature:**



## Associated Documents

404284614 - FORM 3 WELL LIST

404284615 - FORM 3 INACTIVE WELLS

404284616 - FORM 3 OTHER FINANCIAL ASSURANCE

404284617 - FORM 3 PLUGGED WELLS HAVE NOT PASSED FINAL RECLAMATION

404284618 - FORM 3 SUBMITTED

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