

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.

Document Number:
 404582843
 Date Received:

ECMC Operator Number: 47120 Contact Name: CANDICE BARBER
 Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP Phone: (307) 233-4513
 Address: P O BOX 173779 Fax: _____
 City: DENVER State: CO Zip: 80217- Email: candice_barber@oxy.com

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

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

API Number 05-123-06136-00
 Well Name: OLSON Well Number: 1
 Location: QtrQtr: NWSW Section: 34 Township: 4N Range: 68W Meridian: 6
 County: WELD Federal, Indian or State Lease Number: _____
 Field Name: WILDCAT Field Number: 99999

Only Complete the Following Background Information for Intent to Abandon

Latitude: 40.267970 Longitude: -104.996349
 GPS Data: GPS Quality Value: 1.2 Type of GPS Quality Value: PDOP Date of Measurement: 03/11/2026
 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	9+5/8	J-55	36#	0	265		265	0	VISU
OPEN HOLE	12+1/4	7+7/8	N/A			2228				

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 112 sks cmt from 265 ft. to 223 ft. Plug Type: CASING Plug Tagged:
Set 78 sks cmt from 223 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 _____ 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 _____ sacks half in. half out surface casing from _____ ft. to _____ ft. Plug Tagged:
Set 2 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: 54
Surface Plug Setting Date: 01/16/2026 Cut and Cap Date: 03/11/2026

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

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: REGULATORY 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

Att Doc Num	Name
404582870	OPERATIONS SUMMARY
404582873	WELLBORE DIAGRAM
404582874	CEMENT JOB SUMMARY
404582875	OTHER

Total Attach: 4 Files

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)