



<div>FORM 6</div> <div>Rev 11/20</div>	<div>State of Colorado</div> <div>Energy & Carbon Management Commission</div> <div>1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109</div>	<div></div>	<table><tr><td>DE</td><td>ET</td><td>OE</td><td>ES</td></tr></table>	DE	ET	OE	ES																													
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<div>WELL ABANDONMENT REPORT</div> <div><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>			<div>Document Number: 403699399</div> <div>Date Received:</div>																																	
<div><div>OGCC Operator Number: 100322</div><div>Contact Name: Kevin Monaghan</div><div>Name of Operator: NOBLE ENERGY INC</div><div>Phone: (303) 2284000</div><div>Address: 1099 18TH STREET SUITE 1500</div><div>Fax:</div><div>City: DENVER State: CO Zip: 80202</div><div>Email: kevin.monaghan@chevron.com</div><div><div>For "Intent" 24 hour notice required,</div><div>Name:</div><div>Tel:</div><div>COGCC contact:</div><div>Email:</div></div></div>																																				
<div>Type of Well Abandonment Report: <input type="checkbox"/> Notice of Intent to Abandon <input checked="" type="checkbox"/> Subsequent Report of Abandonment</div>																																				
<div><div>API Number 05-123-30498-00</div><div>Well Name: GUTTERSEN D Well Number: 15-28</div><div>Location: QtrQtr: NWNE Section: 15 Township: 3N Range: 64W Meridian: 6</div><div>County: WELD Federal, Indian or State Lease Number:</div><div>Field Name: WATTENBERG Field Number: 90750</div></div>																																				
<div><div>Only Complete the Following Background Information for Intent to Abandon</div><div><div>Latitude: 40.232349 Longitude: -104.537136</div><div>GPS Data: GPS Quality Value: 2.7 Type of GPS Quality Value: Date of Measurement: 07/14/2010</div><div><div>Reason for Abandonment: <input type="checkbox"/> Dry <input type="checkbox"/> Production Sub-economic <input type="checkbox"/> Mechanical Problems</div><div><input type="checkbox"/> Other</div><div>Casing to be pulled: <input type="checkbox"/> Yes <input type="checkbox"/> No Estimated Depth:</div><div>Fish in Hole: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain details below</div><div>Wellbore has Uncemented Casing leaks: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain details below</div><div>Details:</div></div></div></div>																																				
<div><div>Current and Previously Abandoned Zones</div><table><tr><th>Formation</th><th>Perf. Top</th><th>Perf. Btm</th><th>Abandoned Date</th><th>Method of Isolation</th><th>Plug Depth</th></tr><tr><td>CODELL</td><td>6961</td><td>6974</td><td>04/27/2019</td><td>B PLUG CEMENT TOP</td><td>6650</td></tr><tr><td>NIOBRARA</td><td>6700</td><td>6756</td><td>04/27/2019</td><td>B PLUG CEMENT TOP</td><td>6650</td></tr></table><div>Total: 2 zone(s)</div></div>				Formation	Perf. Top	Perf. Btm	Abandoned Date	Method of Isolation	Plug Depth	CODELL	6961	6974	04/27/2019	B PLUG CEMENT TOP	6650	NIOBRARA	6700	6756	04/27/2019	B PLUG CEMENT TOP	6650															
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Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 6650 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 <u>25</u> sks cmt from <u>4025</u> ft. to <u>3696</u> ft.	Plug Type: <u>OPEN HOLE</u>	Plug Tagged: <input checked="" type="checkbox"/>
Set <u>25</u> sks cmt from <u>2415</u> ft. to <u>2086</u> ft.	Plug Type: <u>OPEN HOLE</u>	Plug Tagged: <input checked="" type="checkbox"/>
Set <u>67</u> sks cmt from <u>877</u> ft. to <u>0</u> ft.	Plug Type: <u>CASING</u>	Plug Tagged: <input type="checkbox"/>
Set _____ sks cmt from _____ ft. to _____ ft.	Plug Type: _____	Plug Tagged: <input type="checkbox"/>
Set _____ sks cmt from _____ ft. to _____ ft.	Plug Type: _____	Plug Tagged: <input type="checkbox"/>

Perforate and squeeze at 877 ft. with 216 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 _____ sacks half in. half out surface casing from _____ ft. to _____ 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: 11/17/2023 Cut and Cap Date: 01/27/2024 Number of Days from Setting Surface Plug to Capping or Sealing the Well: 71

*Wireline Contractor: Ranger

*Cementing Contractor: Ranger

Type of Cement and Additives Used: Class G Neat

Flowline/Pipeline has been abandoned per Rule 1105 ☐ Yes ☒ No

Technical Detail/Comments:

Procedure email attached

Cut CSG @ 877'

Form 5A DocNum: 402081267

Form 17 DocNum: 403603641

Form 27 DocNum: 402990301

Form 42 DocNum: 403587882

Form 44 DocNum: Flowline will be abandoned

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

Signed: _____

Print Name: Lauren Hoff

Title: HSE Reg Affairs

Date: _____

Email: denverregulatory@chevron.onmicrosoft.com

Based on the information provided herein, this Well Abandonment Report (Form 6) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____

Date: _____

CONDITIONS OF APPROVAL, IF ANY:

COA Type	Description
0 COA	

Attachment List

Att Doc Num	Name
403699401	CEMENT JOB SUMMARY
403699402	OPERATIONS SUMMARY
403699403	OTHER
403699404	WELLBORE DIAGRAM
403699405	WIRELINE JOB SUMMARY

Total Attach: 5 Files

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)