

ARM 36.22.307, 601, 605,
1003, 1004, 1011, 1013,
1103, 1222, 1240, 1301,
1306, 1309, and 1417
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FEB 29 2024

Submit In Quadruplicate To:
MONTANA BOARD OF OIL AND GAS CONSERVATION
2535 ST. JOHNS AVENUE
BILLINGS, MONTANA 59102

MONTANA BOARD OF OIL & GAS CONSERVATION • BILLINGS

SUNDRY NOTICES AND REPORT OF WELLS

Operator EMEP Operating, LLC		Lease Name: Charles Nevins
Address 1200 Smith Street, Ste 680		Type (Private/State/Federal/Tribal/Allotted): Private
City Houston	State TX	Zip Code 77002
Telephone 346-261-1474	Fax	Well Number: 2-12H
Location of well (1/4-1/4 section and footage measurements): SW SW 360' FSL & 250' FWL (Sec. 12 T23N-R57E)		Unit Agreement Name:
		Field Name or Wildcat: Elm Coulee
API Number: 25 083 22640		Township, Range, and Section: Section 12: T23N-R57E
State	County	Well
Well Type (oil, gas, injection, other): Oil		County: Richland County

Indicate below with an X the nature of this notice, report, or other data:

Notice of Intention to Change Plans	<input type="checkbox"/>	Subsequent Report of Mechanical Integrity Test	<input type="checkbox"/>
Notice of Intention to Run Mechanical Integrity Test	<input type="checkbox"/>	Subsequent Report of Stimulation or Treatment	<input type="checkbox"/>
Notice of Intention to Stimulate or to Chemically Treat	<input type="checkbox"/>	Subsequent Report of Perforation or Cementing	<input type="checkbox"/>
Notice of Intention to Perforate or to Cement	<input checked="" type="checkbox"/>	Subsequent Report of Well Abandonment	<input type="checkbox"/>
Notice of Intention to Abandon Well	<input type="checkbox"/>	Subsequent Report of Pulled or Altered Casing	<input type="checkbox"/>
Notice of Intention to Pull or Alter Casing	<input type="checkbox"/>	Subsequent Report of Drilling Waste Disposal	<input type="checkbox"/>
Notice of Intention to Change Well Status	<input type="checkbox"/>	Subsequent Report of Production Waste Disposal	<input type="checkbox"/>
Supplemental Well History	<input type="checkbox"/>	Subsequent Report of Change in Well Status	<input type="checkbox"/>
Other (specify) Refrac	<input checked="" type="checkbox"/>	Subsequent Report of Gas Analysis (ARM 36.22.1222)	<input type="checkbox"/>

Describe Proposed or Completed Operations:
Describe planned or completed work in detail. Attach maps, well-bore configuration diagrams, analyses, or other information as necessary. Indicate the intended starting date for proposed operations or the completion date for completed operations.
EMEP Operating, LLC ("EMEP") respectfully submits this Notice of Intent to perform a refrac.
Please find attached (1) EMEP's Recompletion Procedure for the Charles Nevins 2-12H, and (2) the Fracturing Fluid Disclosure.

**SEE ATTACHED
CONDITIONS OF
APPROVAL**

BOARD USE ONLY

Approved MAR 20 2024
Date

[Signature]
Name

Admin / Ref. Engineer
Title

The undersigned hereby certifies that the information contained on this application is true and correct.

2/27/2024
Date

[Signature]
Signed (Agent)

Kyle D. Dubiel - Vice President BD, Land and Legal
Print Name and Title

Telephone: 346-261-1474

SUPPLEMENTAL INFORMATION

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NOTE: Additional information or attachments may be required by Rule or by special request.

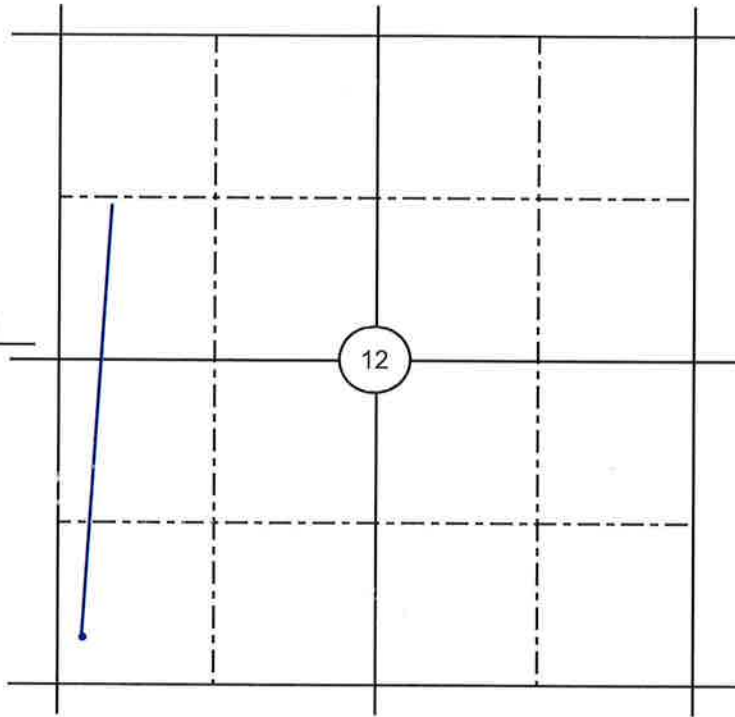
FEB 29 2024

Plot the location of the well or site that is the subject of this notice or report.

**MONTANA BOARD OF OIL &
GAS CONSERVATION • BILLINGS**

Range 57E

Township 23N



BOARD USE ONLY

CONDITIONS OF APPROVAL

The operator must comply with the following condition(s) of approval:

Failure to comply with the conditions of approval may void this permit.

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MONTANA BOARD OF OIL & GAS CONSERVATION • BILLINGS

BEGIN DATA Date Indicator : Disclosure TYPE

System	Fracture Date
State	MT
County	Richland
API Number	25-083-22640
Operator Name	Eagle Mountain Energy
Well Name and Number	E22126588
Longitude	-104.356172
Latitude	47.762369
Federal Well	
Inclin Well	
Long/Lat Projection	NAD83
Fracture End Date	10/3/82
Total Water Volume (gal)	2,688,866
Water Source	

Trade Name	Supplier	Purpose	Ingredients	Chemical Abstract Service Number (CAS #)	Maximum Ingredient Concentration in Additive (% by mass)**	Mass of Additive (lbs)	Comment
Sand (Proppant)	CWS	Proppant Agent					
Br-Solite G0123x	CWS	Surfactant					
CalSurf™ 8401	CWS	Surfactant					
CalSurf™ 8421	CWS	Friction Reducer					
CalVac™ 6534	CWS	Scale Inhibitor					
DynaScale™ 3515	CWS	Scale Inhibitor					
12-hydroxysebacic acid-polyethylene glycol copolymer				70142-34-6	0.70%	166.76	
Acrylamide				75-06-6	0.10%	23.82	
alcohol, C12-14-secondary, ethoxylated				84138-90-8	0.30%	119.11	
Alcohol C10-C16 Ethoxylates				69002-97-3	4.00%	2,044.39	
Alkyl dimethyl benzyl ammonium chloride				69424-85-1	4.00%	183.08	
Aluminum oxide				1344-28-1	4.00%	19,400.00	
Ammonium acrylate				19604-68-0	0.10%	33.82	
ammonium chloride				12125-82-8	1.40%	33.82	
Apatite				84478-38-6	1.40%	2,015.00	
Bicelite				1302-27-8	0.10%	16,200.00	
Calcite				471-34-1	1.00%	76,000.00	
Chromite Sand				86072-82-3	30.00%	2,273,700.00	
Crystalline silica (Quartz)				14808-80-7	100.00%	14.29	
Diethylene triaminetetraacetic acid, pentasodiumsalt				140-01-2	0.06%	0.71	
Dioxane				123-81-1	0.00%	4,526.36	
Duallatac (Pentolium), Hydroxymethyl Light				69742-47-8	19.00%	3,066.59	
Ethoxylated Alcohol, C10-18				69002-97-1	30.00%	0.07	
Ethylene oxide				75-21-8	0.00%	733.61	
Guanadialdehyde				111-30-8	12.00%	2,015.00	
Guarinite				1310-14-1	0.10%	195.00	
Guar				12173-60-3	1.00%	47.65	
Isopropanol				69072-94-7	0.20%	8,735.92	
Methanol				67-56-5	60.00%	534.72	
Organic Acid Salt				91-59-1	15.00%	10,400.00	
Paraffinic oils				64729-98-7	7.00%	168.76	
Phenol-formaldehyde copolymer				8063-35-0	4.00%	0.71	
poly(cov-1, 2-ethanediyl), alpha-hydro-omega-hydroxy, ether with D-glucitol (2-1), tetra (82-9-octadecenoate)				61723-63-8	0.00%	7,651.32	
Polyethylene glycol				25322-48-3	0.00%	51.15	
Polymer				28110-47-0	32.00%	142.84	
polyoxyethylene monooleate				9004-96-0	2.40%	238.23	
Potassium acetate				127-08-2	0.03%	238.23	
Sodium hydrogensulfate				7631-90-5	0.80%	22,461,801.88	
Sorbitan oleate				1338-43-8	1.00%		
Water	Operator and CWS	Base Fluid and Mix Water	Water	7732-18-5	100.00%		

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MONTANA BOARD OF OIL AND GAS ATTACHMENT TO FORM 2 “CONDITIONS OF APPROVAL”

A. Field Inspector must be notified at least **24 hours** in advance of the start of fracture stimulation operation.

B. 36.22.1106 SAFETY AND WELL CONTROL REQUIREMENTS – HYDRAULIC FRACTURING

(1) New and existing wells which will be stimulated by hydraulic fracturing must demonstrate suitable and safe mechanical configuration for the stimulation treatment proposed.

(2) Prior to initiation of fracture stimulation, the operator must evaluate the well. If the operator proposes hydraulic fracturing through production casing or through intermediate casing, **the casing must be tested to the maximum anticipated treating pressure**. If the casing fails the pressure test it must be repaired or the operator must use a temporary casing string (fracturing string).

(a) **If the operator proposes hydraulic fracturing through a fracturing string, it must be strung into a liner or run on a packer set not less than 100 feet below the cement top of the production or intermediate casing and must be tested to not less than maximum anticipated treating pressure minus the annulus pressure applied between the fracturing string and the production or immediate casing.**

(3) A casing pressure test will be considered successful if the pressure applied has been held for 30 minutes with no more than ten percent pressure loss.

(4) A **pressure relief valve(s)** must be installed on the treating lines between pumps and wellhead to limit the line pressure to the test pressure determined above; the well **must be equipped with a remotely controlled shut-in device** unless waived by the board administrator should the factual situation warrant.

(5) **The surface casing valve must remain open** while hydraulic fracturing operations are in progress; the annular space between the fracturing string and the intermediate or production casing must be monitored and may be pressurized to a pressure not to exceed the pressure rating of the lowest rated component that would be exposed to pressure should the fracturing string fail.

History: 82-11-111, MCA; IMP, 82-11-111, MCA; NEW, 2011 MAR p. 1686, Eff. 8/26/11.

C. 36.22.1010 WORK-OVER, RECOMPLETION, WELL STIMULATION – NOTICE AND APPROVAL

(1) Within 30 days following completion of the well work, a subsequent report of the actual work performed must be submitted on Form No. 2.