

Submit in Quadruplicate To:

MONTANA BOARD OF OIL AND GAS CONSERVATION
2535 ST. JOHNS AVENUE
BILLINGS, MONTANA 59102

RECEIVED

MAR 27 2024

SUNDRY NOTICES AND REPORT OF WELLS

MONTANA BOARD OF OIL & GAS CONSERVATION - BILLINGS

Operator White Rock Oil & Gas, LLC.
Address 5810 Tennyson Pkwy, Suite 500
City Plano State TX Zip Code 75024
Telephone (214) 981-1400 Fax _____

Lease Name:
BR

Type (Private/State/Federal/Tribal/Allotted):
Private

Well Number:
11-27H 43

Location of well (1/4-1/4 section and footage measurements):
NW NW, 400 FNL & 800 FWL

Unit Agreement Name:

Field Name or Wildcat:
Elm Coulee

Township, Range, and Section:
24N, 53E, 27

API Number:
25 | 083 | 22523
State County Well

Well Type (oil, gas, injection, other):
Oil

County:
Richland

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

- Notice of Intention to Change Plans
- Notice of Intention to Run Mechanical Integrity Test
- Notice of Intention to Stimulate or to Chemically Treat
- Notice of Intention to Perforate or to Cement
- Notice of Intention to Abandon Well
- Notice of Intention to Pull or Alter Casing
- Notice of Intention to Change Well Status
- Supplemental Well History
- Other (specify) _____


- Subsequent Report of Mechanical Integrity Test
- Subsequent Report of Stimulation or Treatment
- Subsequent Report of Perforation or Cementing
- Subsequent Report of Well Abandonment
- Subsequent Report of Pulled or Altered Casing
- Subsequent Report of Drilling Waste Disposal
- Subsequent Report of Production Waste Disposal
- Subsequent Report of Change in Well Status
- Subsequent Report of Gas Analysis (ARM 36.22.1222)

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.

This is a planned plug and perf reentry. Will run a 4.5" liner with associated float equipment and hanger/packer then isolate and frac one of the three laterals. Procedure, schematics, and chemical disclosure are attached.

**SEE ATTACHED
CONDITIONS OF
APPROVAL**

BOARD USE ONLY	
Approved <u>APR 24 2024</u>	Date
	Name
<u>Admin/Pl. Engineer</u>	Title

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

<u>03/26/2024</u>	<u>Eric Linthicum</u>
Date	Signed (Agent)
Eric Linthicum, Regulatory Manager	
Print Name and Title	
Telephone: _____	(214) 666-4826

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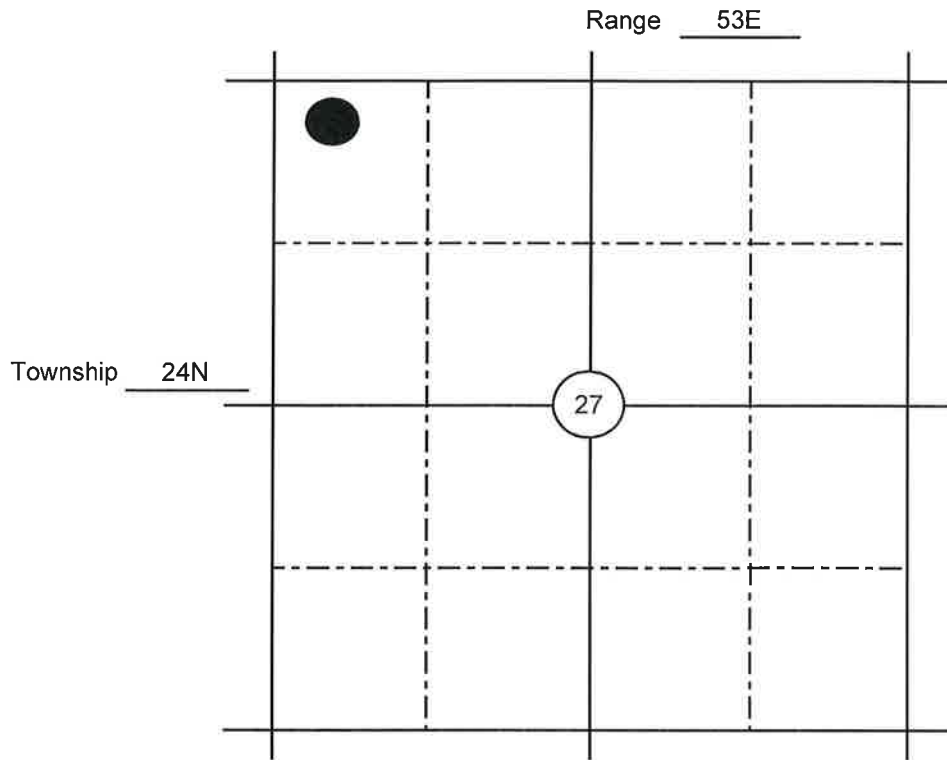
MAR 27 2024

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

SUPPLEMENTAL INFORMATION

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

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



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.

08322523



Fracture Start Date/Time:	
Fracture End Date/Time:	
State:	Montana
County:	Richland County
API Number:	
Operator Number:	
Well Name:	25 Stages
Federal Well:	No
Tribal Well:	No
Longitude:	1.0001
Latitude:	1.0001
Long/Lat Projection:	
True Vertical Depth (TVD):	10,000'
Total Clean Fluid Volume* (gal):	4,034,730
Water Source:	Fresh
Water Source TDS:	
Water Source Percent:	100

Additive	Specific Gravity	Additive Quantity
Water	1.00	4,034,730
Sand (100 Mesh Proppant)	2.65	830,000
Sand (40/70 White Proppant)	2.65	3,320,000
Hydrochloric Acid (7.5%)	1.04	13,750
Acid Pack Pro HT	1.10	55
ProSlick 978	1.10	5,245
ProSurf 171	1.02	4,035
BioSuiteGQ123X	1.04	606
ProChek 170	1.03	404
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Ingredients Section:

Trade Name	Supplier	Purpose	Ingredients	Chemical Abstract Service Number (CAS #)	Maximum Ingredient Concentration in Additive (% by mass)**	Mass per Component (LBS)
Water	Operator	Carrier/Base Fluid	Water	7732-18-5	100.00%	33,669,822
Sand (100 Mesh Proppant)	ProFrac	Proppant	Crystalline Silica (quartz)	14808-60-7	100.00%	830,000
Sand (40/70 White Proppant)	ProFrac	Proppant	Crystalline Silica (quartz)	14808-60-7	100.00%	3,320,000
Hydrochloric Acid (7.5%)	Reagent	Acidizing	Hydrochloric Acid	7647-01-0	7.50%	8,928
			Water	7732-18-5	92.50%	110,118
ProSurf 171	ProFrac	Surfactant	Methyl alcohol	67-56-1	40.00%	13,698
			Surfactant	68603-42-9	10.00%	3,424
			Ethyl alcohol	64-17-5	40.00%	13,698
Acid Pack Pro HT	CNR	Acid Inhibitor	Isotridecanol, ethoxylated	9040-30-5	1.75%	9
			Alcohols, C12 - 14 secondary, ethoxylated	84133-50-6	8.00%	40
			Methyl 9-decenoate	25601-41-6	1.00%	5
			Methyl 9-dodecenoate	39202-17-0	1.00%	5
			Sodium xylene sulfonate	1300-72-7	0.25%	1
			Clric Acid	77-92-9	10.00%	50
			Pyridinium, 1-(phenylmethyl)-, Et Me derivs, chloride	68909-18-2	25.00%	126
			Ethylene glycol	107-21-1	42.00%	212
			Water	7732-18-5	5.00%	25
			2-Propenal, 3-phenyl	104-55-2	4.00%	20
			Methanol	67-56-1	2.00%	10
ProSlick 978	ProFrac	Friction Reducer	Methyl alcohol	67-56-1	40.00%	19,259
			Surfactant	68603-42-9	10.00%	4,815
BioSuiteGQ123X	BioSuite	Biocide	Glutaraldehyde	111-30-8	15.00%	785
			Alkyl dimethyl benzyl ammonium chloride (C12-16)	68424-85-1	5.00%	262
ProChek 170	ProFrac	Scale Inhibitor	Methyl alcohol	67-56-1	5.00%	174

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 stung 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.