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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
Address 1200 Smith Street, Ste 680
City Houston State TX Zip Code 77002
Telephone 346-261-1474 Fax

Lease Name:
Peanut East-Hines

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

Well Number:
11-14H

Location of well (1/4-1/4 section and footage measurements):
SE SW 183' FSL & 1890' FWL (Sec. 11-T24N-R57E)

Unit Agreement Name:

Field Name or Wildcat:
Elm Coulee

Township, Range, and Section:
Section 11: T24N-R57E

API Number:
25 | 083 | 22527
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
- 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) Refrac

- 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.

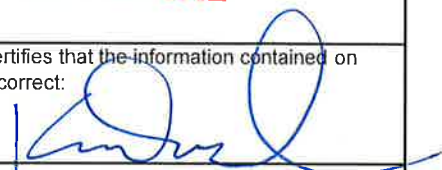
EMEP Operating, LLC ("EMEP") respectfully submits this Notice of Intent to perform a refrac.

Please find attached (1) EMEP's Recompletion Procedure for the Peanut East-Hines 11-14H, and (2) the Fracturing Fluid Disclosure.

**SEE ATTACHED
CONDITIONS OF
APPROVAL**

BOARD USE ONLY	
Approved	<u>MAR 19 2024</u> Date
	<u>Admin/Pet. Engineer</u> Name Title

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

2/27/2024 
Date Signed (Agent)

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

Telephone: 346-261-1474

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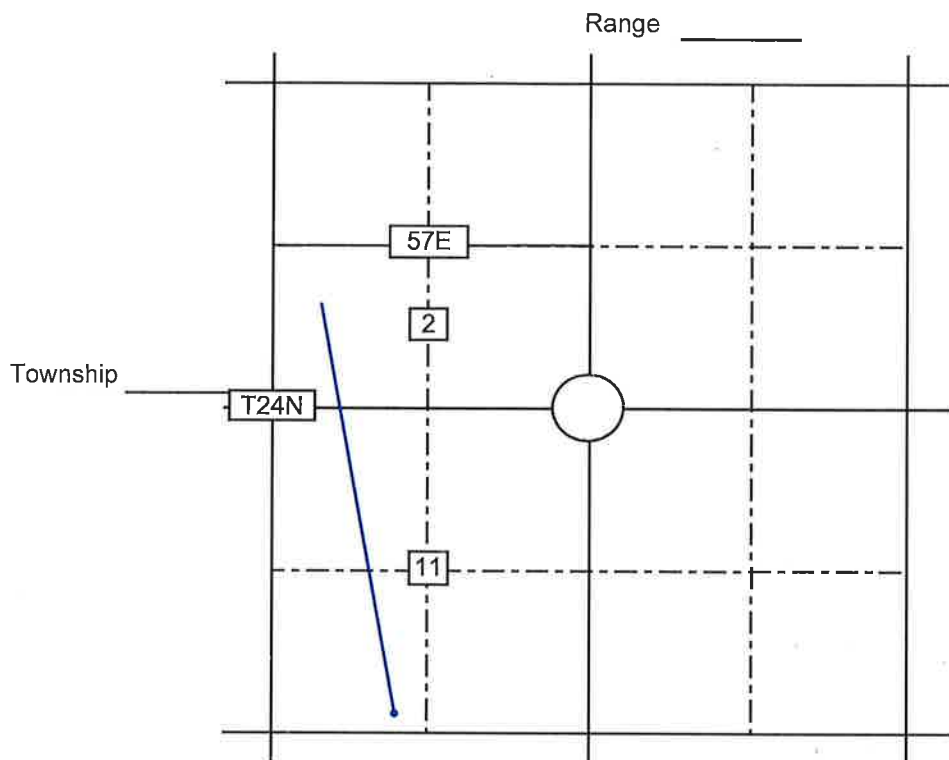
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MONTANA BOARD OF OIL & GAS CONSERVATION • BILLINGS

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.

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MONTANA BOARD OF OIL & GAS CONSERVATION - BILLINGS

BEGIN DATA : Data Indicator System : Disclosure TYPE

Fracture Date:	MT
State:	Richland
County:	25-083-22527
API Number:	Edgie Mountain Energy
Operator Name:	E2212688
Well Name and Number:	Peanut East Hines 11-14H
Longitude:	-104.376807
Latitude:	47.84906
Federal Well:	
Indian Well:	
Long/Lat Projection:	NAD83
Fracture End Date:	10.802
Total Water Volume (gall)~:	4,392,425
Well Type:	
Water Source:	

Trade Name	Supplier	Purpose	Ingredients	Chemical Abstract Service Number (CAS #)	Maximum Ingredient Concentration in Additive (% by mass)**	Mass of Additive (lbs)	Comment
Surfactant	CWS	Surfactant	12-hydroxyoctanoic acid-polyethylene glycol copolymer	70142-34-6	0.70%	310.27	
Surfactant	CWS	Surfactant	Acrylamide	79-06-1	0.10%	41.42	
Surfactant	CWS	Surfactant	Alcohol, C12-14-secondary, ethoxylated	84133-50-6	0.60%	251.62	
Surfactant	CWS	Surfactant	Alkyl dimethyl benzyl ammonium chloride	56002-87-1	40.00%	1565.73	
Surfactant	CWS	Surfactant	Aluminum oxide	58424-85-1	3.00%	1140.56	
Surfactant	CWS	Surfactant	Ammonium acrylate	1344-28-1	4.00%	1500.00	
Surfactant	CWS	Surfactant	Ammonium chloride	10604-69-0	0.10%	41.32	
Surfactant	CWS	Surfactant	Ammonium chloride	12125-02-9	1.40%	520.54	
Surfactant	CWS	Surfactant	Ammonium chloride	64476-38-6	0.10%	3.045.00	
Surfactant	CWS	Surfactant	Ammonium chloride	1302-27-8	0.10%	3.045.00	
Surfactant	CWS	Surfactant	Ammonium chloride	471-34-1	1.00%	27.300.00	
Surfactant	CWS	Surfactant	Ammonium chloride	89072-82-3	30.00%	84.500.00	
Surfactant	CWS	Surfactant	Ammonium chloride	14809-60-7	100.00%	84.500.00	
Surfactant	CWS	Surfactant	Ammonium chloride	140-01-2	0.05%	26.59	
Surfactant	CWS	Surfactant	Ammonium chloride	133-81-1	0.00%	1.33	
Surfactant	CWS	Surfactant	Ammonium chloride	84742-47-8	19.00%	8.421.62	
Surfactant	CWS	Surfactant	Ammonium chloride	98002-97-1	30.00%	5.695.10	
Surfactant	CWS	Surfactant	Ammonium chloride	75-21-8	0.00%	0.13	
Surfactant	CWS	Surfactant	Ammonium chloride	111-30-8	12.00%	1.362.22	
Surfactant	CWS	Surfactant	Ammonium chloride	1310-14-1	0.10%	3.045.00	
Surfactant	CWS	Surfactant	Ammonium chloride	12173-60-9	1.00%	3.150.00	
Surfactant	CWS	Surfactant	Ammonium chloride	87-58-2	0.10%	315.00	
Surfactant	CWS	Surfactant	Ammonium chloride	87-56-1	0.20%	88.65	
Surfactant	CWS	Surfactant	Ammonium chloride	Proprietary	60.00%	16.233.37	Proprietary CAS
Surfactant	CWS	Surfactant	Ammonium chloride	64742-45-0	1.00%	3.935.61	
Surfactant	CWS	Surfactant	Ammonium chloride	64742-45-0	7.70%	12.603.07	
Surfactant	CWS	Surfactant	Ammonium chloride	9003-35-4	0.70%	310.27	
Surfactant	CWS	Surfactant	Ammonium chloride	61723-83-9	0.70%	1.33	
Surfactant	CWS	Surfactant	Ammonium chloride	25322-68-3	0.00%	0.00	
Surfactant	CWS	Surfactant	Ammonium chloride	26105-47-0	32.00%	14.183.76	
Surfactant	CWS	Surfactant	Ammonium chloride	9004-96-0	2.40%	1.063.78	
Surfactant	CWS	Surfactant	Ammonium chloride	127-08-2	0.03%	1.30	
Surfactant	CWS	Surfactant	Ammonium chloride	7631-90-5	0.60%	263.55	
Surfactant	CWS	Surfactant	Ammonium chloride	1338-43-8	1.00%	443.24	
Surfactant	CWS	Surfactant	Ammonium chloride	7732-18-5	100.00%	47,708,036.21	
Water	Operator and CWS	Base fluid and Mix Water	Water				

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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 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.