

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)894-2100 Fax: (303)894-2109



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SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (Page 2 of this form.) Identify well or other facility by API Number or by OGCC Facility ID. Operator shall send an informational copy of all sundry notices for wells located in High Density Areas to the Local Government Designee (Rule 603b.)

1. OGCC Operator Number:	28700	4. Contact Name	Lynn Neely
2. Name of Operator:	ExxonMobil Oil Corporation	Phone:	281-654-1949
3. Address:	P. O. Box 4358, COPR-MI-205	Fax:	281-654-1940
City:	Houston	State:	Tx.
Zip:	77210-4358		
5. API Number	05-103-11182-00	OGCC Facility ID Number	
6. Well/Facility Name:	Piceance Creek Unit	7. Well/Facility Number	197-36A3
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian):	NESW, Sec. 36, T1S, R97W, 6th P.M.	Surface Egprmt Diagram	
9. County:	Rio Blanco	10. Field Name:	Piceance Creek
11. Federal, Indian or State Lease Number:	COD-063141	Technical Info Page	X
		Other	

Complete the Attachment Checklist

OP OGCC

RECEIVED

SEP 01 2010

OGCC/Rifle Office

General Notice

<input type="checkbox"/> CHANGE OF LOCATION:	Attach New Survey Plat	(a change of surface qtr/qtr is substantive and requires a new permit)
Change of Surface Footage from Exterior Section Lines:	FNL/FSL	FEL/FWL
Change of Surface Footage to Exterior Section Lines:		
Change of Bottomhole Footage from Exterior Section Lines:		
Change of Bottomhole Footage to Exterior Section Lines:		
Bottomhole location Qtr/Qtr, Sec, Twp, Rng, Mer		attach directional survey
Latitude	Distance to nearest property line	Distance to nearest bldg, public rd, utility or RR
Longitude	Distance to nearest lease line	Is location in a High Density Area (rule 603b)?
Ground Elevation	Distance to nearest well same formation	Surface owner consultation date:
GPS DATA:		
Date of Measurement	PDOP Reading	Instrument Operator's Name
<input type="checkbox"/> CHANGE SPACING UNIT	Formation Code	Spacing order number
Formation	Unit Acreage	Unit configuration
<input type="checkbox"/> CHANGE OF OPERATOR (prior to drilling):	<input type="checkbox"/> CHANGE WELL NAME	NUMBER
Effective Date:	From:	To:
Plugging Bond: <input type="checkbox"/> Blanket <input type="checkbox"/> Individual	Effective Date:	
<input type="checkbox"/> ABANDONED LOCATION:	<input type="checkbox"/> NOTICE OF CONTINUED SHUT IN STATUS	
Was location ever built? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date well shut in or temporarily abandoned:	
Is site ready for inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No	Has Production Equipment been removed from site? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date Ready for inspection:	MIT required if shut in longer than two years. Date of last MIT	
<input type="checkbox"/> SPUD DATE:	<input type="checkbox"/> REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)	
<input type="checkbox"/> SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK	*submit cbl and cement job summaries	
Method used	Cementing tool setting/perf depth	Cement top
	Cement volume	Cement bottom
		Date
<input type="checkbox"/> RECLAMATION:	Attach technical page describing final reclamation procedures per Rule 1004.	
Final reclamation will commence on approximately	<input type="checkbox"/> Final reclamation is completed and site is ready for inspection.	

Technical Engineering/Environmental Notice

<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Report of Work Done
Approximate Start Date:	Date Work Completed:
09/01/2010	
Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)	
<input type="checkbox"/> Intent to Recomplete (submit form 2)	<input type="checkbox"/> E&P Waste Disposal
<input type="checkbox"/> Change Drilling Plans	<input type="checkbox"/> Beneficial Reuse of E&P Waste
<input type="checkbox"/> Gross Interval Changed?	<input type="checkbox"/> Status Update/Change of Remediation Plans
<input checked="" type="checkbox"/> Casing/Cementing Program Change	for Spills and Releases

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

Signed:

Date:

09/01/2010

Email: lynn.r.neely@exxonmobil.com

Print Name: Lynn Neely

Title: Regulatory Specialist

COGCC Approved:

Title

EIT III

Date:

9/1/2010

CONDITIONS OF APPROVAL, IF ANY: