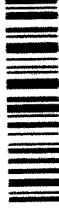
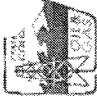


**State of Colorado**  
**Oil and Gas Conservation Commission**  
In Street, Suite 801, Denver, Colorado 80203 Phone: (303)894-2100

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




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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.)

**SUNDRY NOTICE**

1. OGCC Operator Number: 100185		4. Contact Name		<div style="text-align: right;">  </div> <div style="text-align: center;">             Complete the Attached              Checklist           </div>	OP   OGCC
2. Name of Operator: ENCANA OIL & GAS (USA) INC		DeAnne Spector			
3. Address: 370 17TH ST, STE 1700		Phone: 720-876-5826			
City: DENVER State: CO Zip: 80202		Fax: 720-876-6060			
5. API Number 05-045-18538		OGCC Facility ID Number		Survey Plat	
6. Well/Facility Name: Daybreak Federal		7. Well/Facility Number 30-13BB (PL30)		Directional Survey	X
8. Location (Qtr/Ctr, Sec, Twp, Rng, Meridian):		NWSW Sec. 30-T7S-R9SW, 6th PM		Surface Eqpm't Diagram	
9. County: Garfield		10. Field Name: Parachute		Technical Info Page	X
11. Federal, Indian or State Lease Number: N/A				Other	

## General Notice

<input type="checkbox"/> <b>CHANGE OF LOCATION:</b>	<b>Attach New Survey Plat</b> (a change of surface qtr/qtr is substantive and requires a new permit)	FNL/FSL FEL/FWL	attach directional survey
Change of <b>Surface</b> Footage from Exterior Section Lines:			
Change of <b>Surface</b> Footage to Exterior Section Lines:			
Change of <b>Bottomhole</b> Footage from Exterior Section Lines:			
Change of <b>Bottomhole</b> Footage to Exterior Section Lines:			
Bottomhole location Qtr/Qtr, Sec, Twp, Rng, Mer			
Latitude		Distance to nearest property line	
Longitude		Distance to nearest lease line	
Ground Elevation		Distance to nearest well same formation	
		Distance to nearest bldg, public rd, utility or RR	
		Is location in a High Density Area (rule 603b)? Yes/No	
		Surface owner consultation date:	
<b>GPS DATA:</b>			
Date of Measurement		Instrument Operator's Name	
PDOP Reading		Ted T. Taggart	
<b>CHANGE SPACING UNIT</b>			
Formation	Formation Code	Spacing order number	Unit configuration
<input type="checkbox"/> <b>Remove from surface bond</b> Signed surface use agreement attached			

CHANGE OF OPERATOR (prior to drilling):		CHANGE WELL NAME	NUMBER
Effective Date:		From:	
Plugging Bond:	Blanket <input type="checkbox"/> Individual <input type="checkbox"/>	To:	
		Effective Date:	
ABANDONED LOCATION:		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"/> <b>SPUD DATE:</b> _____	<input type="checkbox"/> <b>REQUEST FOR CONFIDENTIAL STATUS</b> (6 mos from date casing set)
<input type="checkbox"/> <b>SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK</b> <div> <div>Method used</div> <div>Cementing tool setting/perf depth</div> <div>Cement volume</div> <div>Cement top</div> <div>Cement bottom</div> <div>Date</div> </div>	*submit cbl and cement job summaries

☐ **RECLAMATION:** Attach technical page describing final reclamation procedures per Rule 1004.  
Final reclamation will commence on approximately ☐ Final reclamation is completed and site is ready for inspection.

☐ Notice of Intent  
Approximate Start Date: \_\_\_\_\_

☐ Report of Work Done  
Date Work Completed: \_\_\_\_\_

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"/> Request to Vent or Flare <input type="checkbox"/> E&P Waste Disposal
<input type="checkbox"/> Change Drilling Plans	<input type="checkbox"/> Repair Well <input type="checkbox"/> Beneficial Reuse of E&P Waste
<input type="checkbox"/> Gross Interval Changed?	<input type="checkbox"/> Rule 502 variance requested <input type="checkbox"/> Status Update/Change of Remediation Plans
<input checked="" type="checkbox"/> Casing/Cementing Program Change	<input type="checkbox"/> Other: _____ 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: *D. Cameron* Date: 10/13/10 Email: [deanne.spector@encana.com](mailto:deanne.spector@encana.com)

Print Name: DeAnne Spector  
Title: Regulatory Analyst

COGCC Approved:  Title: EIT 3 Date: 10/21/2010

CONDITIONS OF APPROVAL, IF ANY:

CONDITIONS OF APPROVAL, IF ANY:



FOR OGCC USE ONLY

1. Operator Number:	100185	API Number:	05-045-18538
2. Name of Operator	ENCANA OIL & GAS (USA) INC.		
3. Well Name:	Day-break Federal	Well Number:	30-13BB (PL 30)
4. Location (Qtr/Ctr, Sec, Twp, Rng, Meridian):	NWSW Sec. 30-17S-R9SW, 6th PM		

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within 30 days of work completed as a "subsequent" report and must accompany Form 4, page 1.

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DESCRIBE PROPOSED OR COMPLETED OPERATIONS

ENCANA OIL & GAS (USA) INC. requests a variance to the Surface Casing depth. We want to change the surface casing depth from 750' to 1050' md.

A revised directional survey is attached.

RECEIVED  
OCT 14 2010

COGCC/Rifle Office