

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 : 100185
2. Name Of Operator : EnCana Oil & Gas (USA) Inc.
3. Address : 370 17th Street, Suite 1700
City : Denver State : CO Zip : 80202
4. Contact Name : MARINA AYALA
Phone : 720-876-5905
Fax : 720-876-4905
5. API Number : 05045198260000
6. Well/Facility Name : SGU 8502A-36 B36 496
7. Well/Facility Number : 8502A-36 B36 496
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian) : Lot2 Sec 36 T4S - R96W 6th PM
9. County : GARFIELD
10. Field Name : Wildcat
11. Federal, Indian or State Lease Number : COC65557

Complete the Attachment Checklist

	OP	OGCC
Survey Plat	<input type="checkbox"/>	<input type="checkbox"/>
Directional Survey	<input type="checkbox"/>	<input type="checkbox"/>
Surface Eqpm Diagram	<input type="checkbox"/>	<input type="checkbox"/>
Technical Info Page	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>

General Notice

☐ **CHANGE OF LOCATION: Attach New Survey Plat** (a change of surface qtr/qtr is substantive and requires a new permit)
FNL/FSL FEL/FWL

Change of **Surface** Footage from Exterior Section Lines:
Change of **Surface** Footage to Exterior Section Lines:
Change of **Bottomhole** Footage from Exterior Section Lines:
Change of **Bottomhole** Footage to Exterior Section Lines:
Bottom hole location Qtr/Qtr, Sec, Twp, Rng, Mer
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)? Yes/No
Ground Elevation Distance to nearest well same formation Surface owner consultation date:

attach directional survey

GPS DATA:
Date of Measurement PDOP Reading Instrument Operator's Name

☐ **CHANGE SPACING UNIT**
Formation Formation Code Spacing order number Unit Acreage Unit configuration
☐ **Remove from surface bond**
Signed surface use agreement attached

☐ **CHANGE OF OPERATOR (prior to drilling):**
Effective Date :
Plugging Bond : ☐ Blanket ☐ Individual

☐ **CHANGE WELL NAME**
From :
To :
Effective Date :
NUMBER

☐ **ABANDONED LOCATION:**
Was location ever built? ☐ Yes ☐ No
Is site ready for inspection? ☐ Yes ☐ No
Date Ready for Inspection:

☐ **NOTICE OF CONTINUED SHUT IN STATUS**
Date well shut in or temporarily abandoned:
Has Production Equipment been removed from site? ☐ Yes ☐ No
MIT required if shut in longer than two years. Date of Last MIT

☐ **SPUD DATE :** ☒ **REQUEST FOR CONFIDENTIAL STATUS:** (6 mos from date casing set)

☐ **SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK**
Method used Cementing tool setting/perf depth Cement volume Cement top Cement bottom Date
*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.

Technical Engineering/Environmental Notice

☐ 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.)

☐ Intent To Recomplete (submit form 2) ☐ Request to Vent or Flare ☐ E&P Waste Disposal
☐ Change Drilling Plans ☐ Repair Well ☐ Beneficial Reuse of E&P Waste
☐ Gross Interval Changed? ☐ Rule 502 variance requested ☐ Status Update/Change of Remediation Plans
☐ Casing/Cementing Program Change ☐ 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: *Marina Ayala* Date : 10/27/2011 Email: marina.ayala@encana.com
Print Name : MARINA AYALA Title : PERMITTING TECHNICIAN

COGCC Approved: _____ Title: _____ Date: _____
CONDITIONS OF APPROVAL, IF ANY: _____