



May 24, 2012

Steven Lindblom  
Colorado Oil and Gas Conservation Commission  
1120 Lincoln, Suite 801  
Denver, CO 80203

Re: Closure request for remediation project number 6783  
Chapman 19-06 API # 05-125-10771  
SENW/4, Sec. 19-T1S-R44W, 6<sup>th</sup> pm  
Yuma County, Colorado

Steve,

We would like to request closure on the above referenced well. The Soil analysis submitted with Form 27 on 09/14/11 showed the EC, PH & SAR above the allowed limits of the COGCC Table 910-1, the location was treated per the recommendations on the Form 27. The area was sampled again on 11/11/11 and the analysis showed the PH & SAR levels still above the allowed limits. The area was sampled again on 04/21/12 with the analysis showing the PH & SAR levels within the allowable limits per the COGCC Table 910-1.

We feel no treatment or further sampling is required, but will continue to monitor the location for re-growth and/or erosion and take any necessary measures to promote the reclamation of the affected area.

If you have any questions or require additional information please feel free to contact me.

Sincerely,

Augustus Energy Partners, LLC

Loni J. Davis  
Operations Accounting and Regulatory Specialist

cc: AEP Well File

State of Colorado  
Oil and Gas Conservation Commission



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



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: 10275A	4. Contact Name: Loni J. Davis	Complete the Attachment Checklist OP OGCC
2. Name of Operator: Augustus Energy Partners, LLC	Phone: 970-332-3585	
3. Address: P. O. Box 250 City: Wray State: CO Zip: 80758	Fax: 970-332-3587	
5. API Number: 05-125-10771	OGCC Facility ID Number	Survey Plat
6. Well/Facility Name: Chapman	7. Well/Facility Number: 19-05	Directional Survey
8. Location (Qtr/Sec, Twp, Rng, Meridian): SENW/4, Sec. 19-T15-R44W, 6th pm		Surface Eqmnt Diagram
9. County: Yuma	10. Field Name: Vernon	Technical Info Page
11. Federal, Indian or State Lease Number:		Other Proj # 6783 <input checked="" type="checkbox"/>

General Notice

CHANGE OF LOCATION: Attach New Survey Plat (a change of surface qtr/qr is substantive and requires a new permit)

Change of Surface Footage from Exterior Section Lines:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Change of Surface Footage to Exterior Section Lines:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Change of Bottomhole Footage from Exterior Section Lines:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Change of Bottomhole Footage to Exterior Section Lines:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Bottomhole location 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: \_\_\_\_\_

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 NUMBER  
 From: \_\_\_\_\_  
 To: \_\_\_\_\_  
 Effective Date: \_\_\_\_\_

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)

<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 volume _____	Cement top _____
Cement bottom _____	Date _____

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.)

<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 type="checkbox"/> Casing/Cementing Program Change	<input checked="" type="checkbox"/> Other: Soil Analysis _____	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: Loni J. Davis Date: 05/24/12 Email: ldavis@augustusenergy.com  
 Print Name: Loni J. Davis Title: Operations Accounting and Regulatory Specialist

COGCC Approved: [Signature] Title: COGS IV Date: 6/1/12

CONDITIONS OF APPROVAL, IF ANY:

FORM  
4  
Rev 12/05

Page 2

### TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

1. OGCC Operator Number: 10275A API Number: 05-125-10771
2. Name of Operator: Augustus Energy Partners, LLC OGCC Facility ID # \_\_\_\_\_
3. Well/Facility Name: Chapman Well/Facility Number: 19-06
4. Location (QtrQtr, Sec, Twp, Rng, Meridian): SENW/4, Sec. 19-T1S-R44W, 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.

5. **DESCRIBE PROPOSED OR COMPLETED OPERATIONS**

Per the attached Soil Analysis the PH level is slightly higher than the allowed per Table 910-1. However, compared to the background level it falls within the Margin of Error. Also, after communications with our consultant, he feels that the PH level is not significant at the depth the sample was taken.

# SOIL ANALYSIS REPORT



6921 S. Bell  
Amarillo, TX 79109  
800.557.7509  
806.677.0093  
Fax 806.677.0329

<b>CLIENT:</b> 6224	ENVIRO-AG ENGINEERING INC 3404 AIRWAY BLVD AMARILLO, TX 79118
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<b>LAB NO:</b>	35354
<b>INVOICE NO:</b>	121224
<b>DATE RECEIVED:</b>	4/25/2012
<b>DATE REPORTED:</b>	5/3/2012

**SOIL ANALYSIS RESULTS FOR:** AUGUSTUS ENERGY **FIELD IDENTIFICATION:** CHAPMAN 19-06 **Proj. #** 6783

METHOD USED:		2:1 Water-Soil	2:1 Water-Soil	Ammonium Acetate	Ammonium Acetate													
Lab Number	Sample ID	Sample Depth	Soil pH	Buffer pH	Sol. Salts mmho/cm	Excess Lime	% Organic Matter	Phosphorus ppm P	Potassium ppm K	Sulfur ppm S/A	Calcium ppm Ca	Magnesium ppm Mg	Sodium ppm Na	Zinc ppm Zn	Iron ppm Fe	Manganese ppm Mn	Copper ppm Cu	Boron ppm B
35354	RETEST	0 - 12	9.2		0.40	Hi			502		4367	282	778					

METHOD USED:		Sat. Paste																	
Lab Number	Sample ID	Sample Depth	Saturation % Sat	Electrical Conductivity mmho/cm	Calcium mg/L Ca	Magnesium mg/L Mg	Sodium mg/L Na	Sodium Adsorption Ratio SAR											
35354	RETEST	0 - 12	37	0.96	22	3	202	10.7											

FERTILIZER RECOMMENDATIONS:		POUNDS ACTUAL NUTRIENT PER ACRE															Cation Exchange Capacity						
Lab Number	Sample ID	Crop To Be Grown	Yield Goal	Lime, ECC Tons/A to raise pH to:			N	P2O5	K2O	Zn	S	Mn	Cu	MgO	B	Ca	Cl						
				6.0	6.5	7.0												CEC	%H	%K	%Ca	%Mg	%Na
35354	RETEST																	29	0	4	76	8	12

**SPECIAL COMMENTS AND SUGGESTIONS:**

Lab Number(s): 35354

WARNING: Soil sodium (% Na) is very high. Typical symptoms of a sodic soil are surface crusting, soil sealing, and poor water penetration. Additional soil analysis can determine the proper rate of gypsum or other soil amendment. If irrigated, water analysis can help identify the sodium source. Contact the laboratory for more information.

Lab Number(s): 35354

CEC calculated by cation summation may overestimate true CEC and underestimate exchangeable sodium percentage (ESP) in soils containing excess lime.

Lab Number(s): 35354

Servi-Tech Laboratory fertilizer recommendations were not requested.

Additional Well: Chapman 19-05

Analyses are representative of the samples submitted      Samples are retained 30 days after report of analysis      Explanations of soil analysis terms are available upon request

Reviewed and  
Approved By:

