



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.)

DE	ET	OE	ES

1. OGCC Operator Number: <u>77330</u>	4. Contact Name Catherine Dickert	Complete the Attachment Checklist OP OGCC
2. Name of Operator: <u>SG Interests I Ltd</u>	Phone: <u>970-385-0696</u>	
3. Address: <u>1485 Florida Road, Suite C202</u> City: <u>Durango</u> State: <u>CO</u> Zip: <u>81301</u>	Fax: <u>970-385-0636</u>	
5. API Number <u>05-</u>	OGCC Facility ID Number <u>418791/421066</u>	Survey Plat <input checked="" type="checkbox"/>
6. Well/Facility Name: <u>McIntyre Flowback Pit</u>	7. Well/Facility Number <u>#3</u>	Directional Survey <input type="checkbox"/>
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian):		Surface Eqpmt Diagram <input type="checkbox"/>
9. County: <u>Gunnison</u>	10. Field Name:	Technical Info Page <input checked="" type="checkbox"/>
11. Federal, Indian or State Lease Number:		Other <input type="checkbox"/>

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:	<input type="checkbox"/>	FNL/FSL <input type="checkbox"/>	FEL/FWL <input type="checkbox"/>
Change of Surface Footage to Exterior Section Lines:	<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"/>
Change of Bottomhole Footage to Exterior Section Lines:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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)? Yes/No <input type="checkbox"/>	
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 _____ Formation Code _____ Spacing order number _____ Unit Acreage _____ Unit configuration _____			<input type="checkbox"/> Remove from surface bond Signed surface use agreement attached
<input type="checkbox"/> CHANGE OF OPERATOR (prior to drilling): Effective Date: _____ Plugging Bond: <input type="checkbox"/> Blanket <input type="checkbox"/> Individual		<input type="checkbox"/> CHANGE WELL NAME NUMBER From: _____ To: _____ Effective Date: _____	
<input type="checkbox"/> ABANDONED LOCATION: Was location ever built? <input type="checkbox"/> Yes <input type="checkbox"/> No Is site ready for inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No Date Ready for Inspection: _____		<input type="checkbox"/> NOTICE OF CONTINUED SHUT IN STATUS Date well shut in or temporarily abandoned: _____ Has Production Equipment been removed from site? <input type="checkbox"/> Yes <input type="checkbox"/> No 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 volume _____ Cement top _____ 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 type="checkbox"/> Notice of Intent Approximate Start Date: _____	<input checked="" type="checkbox"/> Report of Work Done Date Work Completed: <u>06/19/2012</u>
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"/> Change Drilling Plans <input type="checkbox"/> Gross Interval Changed? <input type="checkbox"/> Casing/Cementing Program Change	<input type="checkbox"/> Request to Vent or Flare <input type="checkbox"/> Repair Well <input type="checkbox"/> Rule 502 variance requested <input checked="" type="checkbox"/> Other: <u>submit as-built drawing</u>
<input type="checkbox"/> E&P Waste Disposal <input type="checkbox"/> Beneficial Reuse of E&P Waste <input type="checkbox"/> Status Update/Change of Remediation Plans 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: Catherine Dickert Date: 06/19/2012 Email: cdickert@sginterests.com
 Print Name: Catherine Dickert Title: Environmental and Permitting Manager

COGCC Approved: _____ Title: Environmental Supervisor Date: June 22, 2012

CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



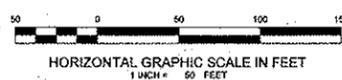
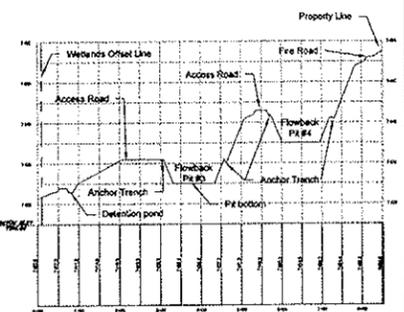
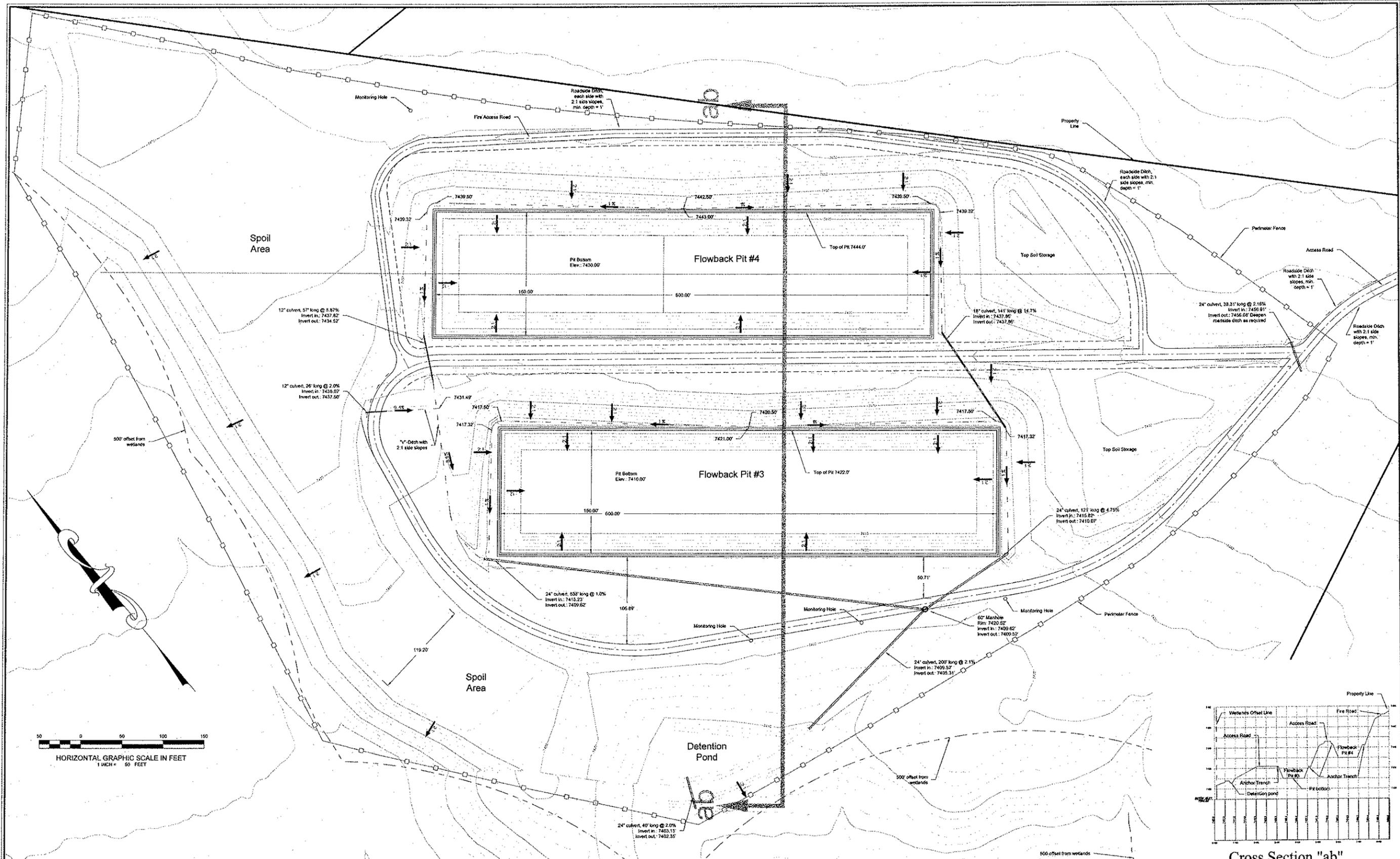
FOR OGCC USE ONLY

1. OGCC Operator Number: <u>77330</u>	API Number: _____
2. Name of Operator: <u>SG Interests I Ltd</u>	OGCC Facility ID # <u>418791/421066</u>
3. Well/Facility Name: <u>McIntyre Flowback Pit</u>	Well/Facility Number: <u>#3</u>
4. Location (QtrQtr, Sec, Twp, Rng, Meridian): <u>NWNE Sec 26 T11S R90W</u>	

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.

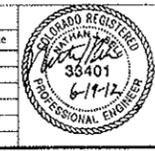
5. **DESCRIBE PROPOSED OR COMPLETED OPERATIONS**

Form 15 COA states "Operator must submit a professional engineer (PE) approved/stamped as-built drawing (plan view and cross-sections) of the completion/flowback pit within 30 calendar days of construction." Please see attached this drawing.



- NOTES**
1. Cut slopes, except for detention pond, are 2:1 (H:V), unless otherwise noted.
 2. Cut and fill slopes for the detention pond are 3:1.

Drawing Revisions		
No.	Description	By Date



BELL CONSULTING, LLC
P.O. Box 8
Rifle, Colorado 81650
Voice: 970/625-9313 Fax: 970/625-9315

Client: **SG Interests, I Ltd.**
1545 Ogden Road
Montrose, CO 81402

Project: **McIntyre Flowback Pits 3 & 4**

Sheet Title: **Asbuilt Conditions McIntyre Flowback Pits**

File: L:\BC-jobs\1105-Bull Mt ponds\Pits 3-4-as-bult R2008.dwg

Sheet Number: **1**

OF 1