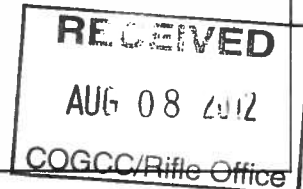




**SUNDRY NOTICE**

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: 96850	4. Contact Name: Greg Davis	Complete the Attachment Checklist OP OGCC
2. Name of Operator: WPX Energy Rocky Mountain, LLC	Phone: (303) 606-4071	
3. Address: 1001 17th Street, Suite 1200 City: Denver State: CO Zip: 80202	Fax: (303) 629-8268	
5. API Number 05-045-20633-00	OGCC Facility ID Number	Survey Plat
6. Well/Facility Name: Federal	7. Well/Facility Number KP 524-18	Directional Survey
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): SWSE 18-T6S-91W		Surface Eqpm Diagram
9. County: Garfield	10. Field Name: Kokopeli	Technical Info Page X
11. Federal, Indian or State Lease Number:		Other

**General Notice**

☐ **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:	FNU/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)? 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

<input type="checkbox"/> <b>CHANGE OF OPERATOR (prior to drilling):</b> Effective Date: _____ Plugging Bond: <input type="checkbox"/> Blanket <input type="checkbox"/> Individual	<input type="checkbox"/> <b>CHANGE WELL NAME</b> <b>NUMBER</b> From: _____ To: _____ Effective Date: _____
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<input type="checkbox"/> <b>ABANDONED LOCATION:</b> 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"/> <b>NOTICE OF CONTINUED SHUT IN STATUS</b> 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 _____
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☐ **SPUD DATE:** \_\_\_\_\_ ☐ **REQUEST FOR CONFIDENTIAL STATUS** (6 mos from date casing set)

☐ **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**

<input type="checkbox"/> <b>Notice of Intent</b> Approximate Start Date: _____	<input type="checkbox"/> <b>Report of Work Done</b> 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 checked="" 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: Permission to Vent Bradenhead Gas 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: Greg Davis Date: 8/8/12 Email: greg.j.davis@wpxenergy.com  
Print Name: Greg Davis Title: Supervisor Permits

COGCC Approved: [Signature] Title NWAE Date: 8/9/12

CONDITIONS OF APPROVAL, IF ANY:

INFORM COGCC OF PROPOSED BHP remediation  
(if venting doesn't result in low (or no) Braden Head Pressure)

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

**RECEIVED**

AUG 08 2012

COGCC/Rifle Office

1. OGCC Operator Number:	96850	API Number:	05-045-20633-00
2. Name of Operator:	WPX Energy Rocky Mountain, LLC OGCC Facility ID #		
3. Well/Facility Name:	Federal	Well/Facility Number:	KP 524-18
4. Location (QtrQtr. Sec. Twp. Rng. Meridian):	SWSE Sec 18 T6S-R91W		

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  
WPX requests permission to vent the bradenhead.

KP 524-18 API (05-045-20633)  
Surface Casing: 9 5/8" 32.30# set at 1433'  
Production Casing: 4 1/2" 11.6# set at 7580'  
No tubing  
No perforations.  
No CBL yet, estimated TOC per temp log was 2275'

The subject well is a new drill with 400 psi on the bradenhead. A CBL will be run on 8/12/12. WPX would like to vent the bradenhead and evaluate the next step to take after the results of the CBL.