

FORM
4
Rev 12/05

Page 1

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.)

RECEIVED
10/8/2012

1. OGCC Operator Number: 100264	4. Contact Name Jessica Dooling	Complete the Attachment Checklist OP OGCC
2. Name of Operator: XTO Energy Inc.	Phone: 970-675-4122	
3. Address: PO Box 6501 City: Englewood State: CO Zip: 80112	Fax: 970-675-4150	
5. API Number 05-103-09711	OGCC Facility ID Number	Survey Plat
6. Well/Facility Name: Piceance Creek Unit	7. Well/Facility Number PCU F31-19G	Directional Survey
8. Location (Qtr/Sec, Twp, Rng, Meridian): NWNE, 19, 2S, 96W, 6th		Surface Eqpm't Diagram
9. County: Rio Blanco	10. Field Name: Piceance Creek Unit	Technical Info Page
11. Federal, Indian or State Lease Number: 45308		Other

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: ☐ 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: ☐ ☐ ☐ ☐ attach directional survey

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)

☐ **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: See Page 2	for Spills and Releases

I hereby certify that the statements made on this form are, to the best of my knowledge, true, correct and complete.

Signed: Jessica Dooling Date: 10/8/2012 Email: jessica.dooling@xtoenergy.com

Print Name: Jessica Dooling Title: Environmental Coordinator

COGCC Approved: Chris Canfield Title: FOR Date: 10/11/2012

CONDITIONS OF APPROVAL, IF ANY:

Chris Canfield
EPS NW Region

close project ✓
CALS



TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

- | | | | |
|--|---------------------------------|-----------------------|--------------|
| 1. OGCC Operator Number: | 100264 | API Number: | 05-103-09711 |
| 2. Name of Operator: | XTO Energy Inc. | OGCC Facility ID # | |
| 3. Well/Facility Name: | Piceance Creek Unit | Well/Facility Number: | PCU F31-19G |
| 4. Location (QtrQtr, Sec, Twp, Rng, Meridian): | NWNE, Sec 19, T2S, R96W, 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.

DESCRIBE PROPOSED OR COMPLETED OPERATIONS

XTO Energy (XTO) completed closure of the Partially Buried Tank Pit on the PCU F31-19G location on 7/25/2012 in accordance with COGCC 900 and 1000 Series Rules.

XTO herein requests No Further Action (NFA) for REM #7102 / DOC #2229228.