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FORM 4  
Rev 1205

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 05-125-06311-00	OGCC Facility ID Number	Survey Plat
6. Well/Facility Name: State	7. Well/Facility Number 11-36	Directional Survey
8. Location (Qtr/Clr, Sec, Twp, Rng, Meridian): SESE/4, Sec. 36 T5N-R47W, 6th pm		Surface Eqmpt Diagram
9. County: Yuma	10. Field Name: Rock Creek	Technical Info Page
11. Federal, Indian or State Lease Number:		Other Proj. # 7128 <input checked="" type="checkbox"/>

General Notice

CHANGE OF LOCATION: Attach New Survey Plat (a change of surface qtr/Clr 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/Clr, 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: 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: 10/05/2012 Email: ldavis@augustusenergy.com  
Print Name: Loni J. Davis Title: Operations Accounting and Regulatory Specialist

OGCC Approved: ACE for Steve Anderton East Env. Super. Date: 11/19/2012  
CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

1. OGCC Operator Number: <u>10275A</u> API Number: <u>05-125-06311-00</u>
2. Name of Operator: <u>Augustus Energy Partners, LLC</u> OGCC Facility ID # _____
3. Well/Facility Name: <u>State</u> Well/Facility Number: <u>11-36</u>
4. Location (QtrQtr, Sec, Twp, Rng, Meridian): <u>SESE/4, Sec. 36 T5N-R47W, 6th pm</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**

- 10/04/12 - The attached soil analysis shows an elevated SAR level in regards to the limits set in the COGCC Table 910-1. The area has been treated with 7.5 lbs/sq ft Hi Cal mixed with 10 lbs/100 sq ft of sulfur. We are requesting approval to add at least 3' of clean fill dirt as the soil sample was taken at a depth of 4 feet to 5 feet. Once the tank opening has been backfilled a closure request letter will be submitted to the COGCC with the soil analysis from the fill dirt and the amount of fill dirt needed for reclamation. We will then crimp straw to alleviate erosion until the location is farmed.
- 07/20/12 - After Wheat crop was removed soil was re-sampled and the PH, EC AND SAR remain at unacceptable levels. We will treat the area with 7.5 lbs/sq-ft with high cal for a total of 848 lbs and mix in 10 lbs/100sq ft of Sulfur. We will manually try to water the treated area to promote the chemical reaction to help insure success of the treatment and will re-sample the soil in approx. 2-3 months.
- 10/04/11 - Location was treated with 150 lbs of High Cal. Farmer planted winter wheat on location. So no further treatment or sampling was done while crop was in ground.

# SOIL ANALYSIS REPORT

**CLIENT:**  
 6224  
 ENVIRO-AG ENGINEERING INC  
 3404 AIRWAY BLVD  
 AMARILLO, TX 79118



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

**LAB NO:** 45538  
**INVOICE NO:** 122600  
**DATE RECEIVED:** 09/14/2012  
**DATE REPORTED:** 09/21/2012

**SOIL ANALYSIS RESULTS FOR AUGUSTUS ENERGY** FIELD IDENTIFICATION: STATE 11-36 Proj 7128

**METHOD USED:**

Lab Number	Sample ID	Sample Depth	Water-Soil		Excess Lime	% Organic Matter	Potassium ppm K	Phosphorus ppm P	Sulfur ppm	Sulfur lb 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	
			2:1	2:1															
45538	RETEST	0 - 8	8.7	0.58	Hi														

**METHOD USED:**

Lab Number	Sample ID	Sample Depth	Saturation % Sat	Electrical Conductivity mhos/cm	Calcium mg/L Ca	Magnesium mg/L Mg	Sodium mg/L Na	Sulfur Adsorption Ratio
45538	RETEST	0 - 8	31	3.21	60	7	650	21.2

**FERTILIZER RECOMMENDATIONS:**

Lab Number	Sample ID	Crop To Be Grown	Yield Goal	POUNDS ACTUAL NUTRIENT PER ACRE											Cation Exchange Capacity																					
				Lime, ECC Tons/A to raise pH to	N	P-Os	K-O	Zn	S	Mh	Cu	MgO	B	Ca	Cl	CEC	%H	%K	%Ca	%Mg	%Na															
45538	RETEST			6.0				6.5	7.0																											

**SPECIAL COMMENTS AND SUGGESTIONS:**  
 Lab Number(s): 45538  
 Servi-Tech Laboratory fertilizer recommendations were not requested.

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      Todd Whatley      Page 1 of 1  
 Approved By:      Laboratory Manager      09/21/2012 3:57 pm