



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	OP	OGCC
2. Name of Operator: WPX Energy Rocky Mountain, LLC	Phone: (303) 606-4071	Completed by: _____	
3. Address: 1001 17th St., Suite 1200 City: Denver State: CO Zip: 80202	Fax: (303) 629-8268	Checked by: _____	
5. API Number: 05-045-06820-00	OGCC Facility ID Number: _____	Survey Plat	
6. Well/Facility Name: Juhan	7. Well/Facility Number: RMV 22-35	Directional Survey	
8. Location (Qtr/Sec, Twp, Rng, Meridian): NW/4 NE/4 Sec. 35-T6S-R94W		Surface Eqmpt Diagram	
9. County: Garfield	10. Field Name: Rulison	Technical Info Page	
11. Federal, Indian or State Lease Number: _____		Other	

RECEIVED
JAN 17 2013
COGCC Rifle Office

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:	<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)

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: 1/17/13 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 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: Vent Bradenhead Pressure	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: 1/17/13 Email: greg.davis@wpxenergy.com
Print Name: Greg Davis Title: Supervisor Permits

COGCC Approved: [Signature] Title: NWAE Date: 1/17/13
CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

RECEIVED
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COGCC/Rifle Office

1. OGCC Operator Number: 96850 API Number: 05-045-06920-00
 2. Name of Operator: WPX Energy Rocky Mountain, LLC OGCC Facility ID # _____
 3. Well/Facility Name: Juhan Well/Facility Number: RMV 22-35
 4. Location (QtrQtr, Sec, Twp, Rng, Meridian): NW/4 NE/4 SEC. 35-T6S-R94W

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

RMV 22-35 (05-045-06920-00)

- Land – Savage
- Minerals – Federal
- Surface Casing – 9 5/8" 36# set @ 331'
- Production Casing – 5 1/2" 17# set @ 7,247'
- PBTD – 7,200'
- Top of cement – 3,636'
- Tubing – 2 3/8" 4.7# set @ 6,688'
- Completion – Mesaverde/Cameo 5,287'-6,664'

During 3rd quarter 2012 monitoring bradenhead was found closed and with a surface pressure of 183 psi which would give us a gradient of 0.755 psi/ft at the shoe based on fluid level of 178 ft. Request to vent bradenhead through an existing line to a tank for 90 days, if possible, or bring in a temporary tank to vent. We would like to determine if pressure will dissipate or if remediation will be needed for this well.