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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
FEB 15 2013
COGCC

1. OGCC Operator Number: 10322	4. Contact Name: Ron Richards
2. Name of Operator: East Cheyenne Gas Storage LLC	Phone: 713-403-6479
3. Address: 10901 West Teller Drive, Suite 200	Fax: 713-800-7004
City: Littleton State: CO Zip: 80127	
5. API Number: 05-075-07181	OGCC Facility ID Number:
6. Well/Facility Name: Schwake A-2	7. Well/Facility Number:
8. Location (Qtr/Sec, Twp, Rng, Meridian): NWNE Sec 6 T11N R52W	
9. County: Logan (075)	10. Field Name: Peetz West
11. Federal, Indian or State Lease Number: N/A	

Complete the Attachment Checklist

OP OGCC

Survey Plat	
Directional Survey	
Surface Eqmnt Diagram	
Technical Info Page	
Other	

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
Change of Surface Footage to Exterior Section Lines:	<input type="checkbox"/> <input type="checkbox"/>
Change of Bottomhole Footage from Exterior Section Lines:	<input type="checkbox"/> <input type="checkbox"/>
Change of Bottomhole Footage to Exterior Section Lines:	<input type="checkbox"/> <input type="checkbox"/> attach directional survey
Bottomhole location Qtr/Sec, Twp, Rng, Mer	
Latitude	Distance to nearest property line
Longitude	Distance to nearest bldg, public rd, utility or RR
Ground Elevation	Distance to nearest lease line
	Is location in a High Density Area (rule 603b)? Yes/No
	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	
From:	NUMBER
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	
Method used	Cementing tool setting/perf depth
Cement volume	Cement top
Cement bottom	Date
*submit cbl and cement job summaries	
<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	<input checked="" type="checkbox"/> Report of Work Done
Approximate Start Date:	Date Work Completed: 11-2012 REF: Proj #4886
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"/> Change Drilling Plans	<input type="checkbox"/> Repair Well
<input type="checkbox"/> Gross Interval Changed?	<input type="checkbox"/> Rule 502 variance requested
<input type="checkbox"/> Casing/Cementing Program Change	<input type="checkbox"/> Other:
<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: Ron Richards Date: 2/14/13 Email: rrichards@mehlh.com
Print Name: Ron Richards Title: Sr. VP

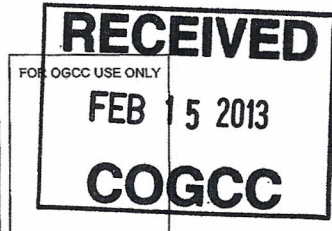
COGCC Approved: [Signature] Title: EPS Date: 3/20/13
CONDITIONS OF APPROVAL, IF ANY:

Related to closure pit Facility ID # 100305
Remediation Project # 4886

FORM
4
Rev 12/05

Page 2

TECHNICAL INFORMATION PAGE



1. OGCC Operator Number: 10322 API Number: 05-075-07181
2. Name of Operator: East Cheyenne Gas Storage LLC OGCC Facility ID # _____
3. Well/Facility Name: Schwake A-2 Well/Facility Number: _____
4. Location (QtrQtr, Sec, Twp, Rng, Meridian): NWNE Sec 6 T11 N R52 W

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

Please see Site Closure Report; Schwake Well A-2 Tank Battery.