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SUNDRY NOTICE

Submit a signed original. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full in Comments or provide as an attachment. Identify Well by API Number; identify Oil and Gas Location by Location ID Number; identify other Facility by Facility ID Number.

OGCC Operator Number: 96850 Contact Name Angela Neifert-Kraiser
 Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC Phone: (303) 606-4398
 Address: 1001 17TH STREET - SUITE #1200 Fax: (303) 629-8268
 City: DENVER State: CO Zip: 80202 Email: Angela.Neifert-Kraiser@WPXENERGY.COM

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 045 11850 00 OGCC Facility ID Number: 282833
 Well/Facility Name: CHEVRON Well/Facility Number: GM 431-29
 Location QtrQtr: NWNE Section: 29 Township: 6S Range: 96W Meridian: 6
 County: GARFIELD Field Name: GRAND VALLEY
 Federal, Indian or State Lease Number: _____

Survey Plat		
Directional Survey		
Srvc Eqpmt Diagram		
Technical Info Page		
Other		

CHANGE OF LOCATION OR AS BUILT GPS REPORT

- Change of Location * As-Built GPS Location Report As-Built GPS Location Report with Survey

* Well location change requires new plat. A substantive surface location change may require new Form 2A.

SURFACE LOCATION GPS DATA Data must be provided for Change of Surface Location and As Built Reports.

Latitude 39.498869 PDOP Reading 2.4 Date of Measurement 04/27/2013
 Longitude -108.128780 GPS Instrument Operator's Name Jack Kirkpatrick

LOCATION CHANGE (all measurements in Feet)

Well will be: _____ (Vertical, Directional, Horizontal)

			FNL/FSL		FEL/FWL	
Change of Surface Footage From Exterior Section Lines:			1304	FNL	1572	FEL
Change of Surface Footage To Exterior Section Lines:						
Current Surface Location From	QtrQtr <u>NWNE</u>	Sec <u>29</u>	Twp <u>6S</u>	Range <u>96W</u>	Meridian <u>6</u>	
New Surface Location To	QtrQtr _____	Sec _____	Twp _____	Range _____	Meridian _____	
Change of Top of Productive Zone Footage From Exterior Section Lines:			206	FNL	1644	FEL
Change of Top of Productive Zone Footage To Exterior Section Lines:						**
Current Top of Productive Zone Location From		Sec <u>29</u>	Twp <u>6S</u>	Range <u>96W</u>		
New Top of Productive Zone Location To		Sec _____	Twp _____	Range _____		
Change of Bottomhole Footage From Exterior Section Lines:			206	FNL	1644	FEL
Change of Bottomhole Footage To Exterior Section Lines:						**
Current Bottomhole Location	Sec <u>29</u>	Twp <u>6S</u>	Range <u>96W</u>			** attach deviated drilling plan
New Bottomhole Location	Sec _____	Twp _____	Range _____			

Is location in High Density Area? _____
 Distance, in feet, to nearest building _____, public road: _____, above ground utility: _____, railroad: _____,
 property line: _____, lease line: _____, well in same formation: _____
 Ground Elevation _____ feet Surface owner consultation date _____

Comments:

ENGINEERING AND ENVIRONMENTAL WORK

NOTICE OF CONTINUED TEMPORARILY ABANDONED STATUS

Indicate why the well is temporarily abandoned and describe future plans for utilization in the COMMENTS box below or provide as an attachment, as required by Rule 319.b.(3).

Date well temporarily abandoned _____ Has Production Equipment been removed from site? _____

Mechanical Integrity Test (MIT) required if shut in longer than 2 years. Date of last MIT _____

SPUD DATE: _____

TECHNICAL ENGINEERING AND ENVIRONMENTAL WORK

Details of work must be described in full in the COMMENTS below or provided as an attachment.

NOTICE OF INTENT Approximate Start Date _____

REPORT OF WORK DONE Date Work Completed 05/23/2013

<input type="checkbox"/> Intent to Recomplete (Form 2 also required)	<input type="checkbox"/> Request to Vent or Flare	<input type="checkbox"/> E&P Waste Mangement Plan
<input type="checkbox"/> Change Drilling Plan	<input type="checkbox"/> Repair Well	<input type="checkbox"/> Beneficial Reuse of E&P Waste
<input type="checkbox"/> Gross Interval Change	<input type="checkbox"/> Rule 502 variance requested. Must provide detailed info regarding request.	
<input checked="" type="checkbox"/> Other <u>GPS UPdated</u>	<input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases	

COMMENTS:

updated final gps as-builts GM 431-29 39.498869 -108.12878 27-Apr-09 2.4 Jack Kirkpatrick

CASING AND CEMENTING CHANGES

Casing Type	Size	Of	/	Hole	Size	Of	/	Casing	Wt/Ft	Csg/LinTop	Setting Depth	Sacks of Cement	Cement Bottom	Cement Top

H2S REPORTING

Data Fields in this section are intended to document Sample and Location Data associated with the collection of a Gas Sample that is submitted for Laboratory Analysis.

Gas Analysis Report must be attached.

H2S Concentration: _____ in ppm (parts per million) Date of Measurement or Sample Collection _____

Description of Sample Point:

Absolute Open Flow Potential _____ in CFPD (cubic feet per day)

Description of Release Potential and Duration (If flow is not open to the atmosphere, identify the duration in which the container or pipeline would likely be opened for servicing operations.):

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Distance to nearest occupied residence, school, church, park, school bus stop, place of business, or other areas where the public could reasonably be expected to frequent: _____

Distance to nearest Federal, State, County, or municipal road or highway owned and principally maintained for public use: _____

COMMENTS:

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BMP

<u>Type</u>	<u>Comment</u>

Total: 0 comment(s)

Operator Comments:

updated GPS as builds GM 431-29 39.498869 -108.12878 27-Apr-09 2.4 Jack Kirkpatrick

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

Signed: _____ Print Name: Angela Neifert-Kraiser

Title: Regulatory Specialist Email: Angela.Neifert-Kraiser@WPXENERGY. Date: _____

Based on the information provided herein, this Sundry Notice (Form 4) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ Date: _____

CONDITIONS OF APPROVAL, IF ANY:

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General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>

Total Attach: 0 Files