

**State of Colorado
Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE	ET	OE	ES
Document Number: 400425010			

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 Howard Harris
 Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC Phone: (303) 606-4086
 Address: 1001 17TH STREET - SUITE #1200 Fax: (303) 629-8265
 City: DENVER State: CO Zip: 80202 Email: howard.haris@wpxenergy.com

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 045 20886 00 OGCC Facility ID Number: 424285
 Well/Facility Name: Diamond Elk, LLC Well/Facility Number: PA 34-2
 Location QtrQtr: NWSW Section: 1 Township: 7S Range: 95W Meridian: 6
 County: GARFIELD Field Name: PARACHUTE
 Federal, Indian or State Lease Number: COC05173

Survey Plat		
Directional Survey		
Srfc 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 _____ PDOP Reading _____ Date of Measurement _____
 Longitude _____ GPS Instrument Operator's Name _____

LOCATION CHANGE (all measurements in Feet)

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

Change of **Surface** Footage **From** Exterior Section Lines:

FNL/FSL		FEL/FWL	
2297	FSL	659	FWL

Change of **Surface** Footage **To** Exterior Section Lines:

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Current **Surface** Location **From** QtrQtr NWSW Sec 1

Twp 7S Range 95W Meridian 6

New **Surface** Location **To** QtrQtr _____ Sec _____

Twp _____ Range _____ Meridian _____

Change of **Top of Productive Zone** Footage **From** Exterior Section Lines:

1114	FSL	1933	FEL
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Change of **Top of Productive Zone** Footage **To** Exterior Section Lines:

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Current **Top of Productive Zone** Location **From** Sec 2

Twp 7S Range 95W

New **Top of Productive Zone** Location **To** Sec _____

Twp _____ Range _____

Change of **Bottomhole** Footage **From** Exterior Section Lines:

1114	FSL	1933	FEL
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Change of **Bottomhole** Footage **To** Exterior Section Lines:

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Current **Bottomhole** Location Sec 2 Twp 7S Range 95W

** 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 05/28/2013

REPORT OF WORK DONE Date Work Completed _____

<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>Remediate LTOC</u>	<input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases	

COMMENTS:

Wellname: PA 34-2 Prepared By: Kristin Trahan
Date: 5/28/2013 Cell phone: 303-482-7901
Field: Parachute Office phone: 303-606-4383

Purpose: Raise Top of Cement

Well Information:

API Number: 05-045-20886
Production Casing: 4-1/2" 11.6# I-80
Shoe Depth: 1516'
Surface Casing Depth 8537'
Tubing: 2 3/8" N-80 at 8,181 ft
Perforated Interval: 8348'-6646'
Top of Mesaverde: 5083'
Top of Gas: 6321'
Correlate Log: Baker CBL Log 4/3/2013
Current TOC: 5068'
Max pressure: 3000 psi

Well History:

WPX drilled this well in February 2013.
Current top of cement was called at 5068', which does not cover the required 200' above top Mesa Verde
Initial bradenhead pressure was 0 psi
A notification of low TOC was sent out along with a request to complete the desired intervals with top perf at 6646'
Permission was granted with the COA that remediation be performed after completions
No problems observed during completion activity
Current bradenhead pressure is 0 psi

Proposed Procedure:

1 MIRU service unit. POOH w/ 2 3/8" tbg

2 RIH w/ wireline and set CBP at 4000 ft.

Bleed gas from wellbore
Pressure test plug to 3000 psi

3 Perforate 3 sqz holes at 3810 ft (deepest true free pipe)

Pump injection test at .5bpm, 1 bpm and 2bpm if there are returns through the bradenhead
Get ISIP, 5, 10 and 15 min shut in pressure
Call Kristin with results
Set retainer at 3710 ft

4 MIRU HES Cement Crew. Sting into retainer and pump 20 bbl Spacer (TBD from injection test)

Pump 150 sx 15.8 ppg Cement
Pump 50 sks 17.0 ppg Neat G Tail w/ 0.5% CFR-3
Displace to within 0.5 bbls of EOT

5 Sting out of retainer, pump 0.5 bbls of cement on top of retainer.

Reverse circulate tubing.
SI Bradenhead to allow cement to set - Monitor pressure.
POOH with tubing and SDFN.

6 Allow for 24 - 48 hrs cement set time.

Monitor Bradenhead Pressure - Call Denver if it reaches 150 psi.

7 MIRU wireline

Run CBL from top of cement to surface shoe (or visible cement)
Send .pdf to Kristin as soon as possible to get approval to continue with operations

8 Wait on orders

Must get new TOC approved from COGCC and BLM

9 RIH with bit and 2 3/8" tubing. Drill out Cement Retainer/cement

POOH bit and tubing.
Pressure Test Squeeze Holes to 1,000 psi
BLM requires pressure test to be charted
Monitor Bradenhead Pressure - Call Denver if it reaches 150 psi.

10 MIRU wireline

Run CBL from CBP to Surface Shoe

11 RIH w/ bit and 2 3/8" tubing

Drill out CBP at 4000 ft.
Clean out rathole
Return well to production

12 Send the following to Kristin

copy of wireline tickets to show plug and perf depths
copy of cement ticket to show cement volumes
copy of pressure chart (send original to Kent)

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:

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

Signed: _____ Print Name: Howard Harris

Title: Sr. Regulatory Specialist Email: howard.haris@wpenergy.com 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