

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

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



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Document Number:  
400436826

**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: 10335 Contact Name Cindy Turner  
 Name of Operator: AXIA ENERGY LLC Phone: (720) 746-5209  
 Address: 1430 LARIMER STREET #400 Fax: (720) 746-5201  
 City: DENVER State: CO Zip: 80202 Email: cturner@axiaenergy.com

Complete the Attachment  
Checklist

OP OGCC

API Number : 05- 081 07737 00 OGCC Facility ID Number: 429645  
 Well/Facility Name: Bulldog Well/Facility Number: 5-14H-789  
 Location QtrQtr: Lot 17 Section: 5 Township: 7N Range: 89W Meridian: 6  
 County: MOFFAT Field Name: WILDCAT  
 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 \_\_\_\_\_ PDOP Reading \_\_\_\_\_ Date of Measurement \_\_\_\_\_  
 Longitude \_\_\_\_\_ GPS Instrument Operator's Name \_\_\_\_\_

**LOCATION CHANGE (all measurements in Feet)**

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

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

	FNL/FSL		FEL/FWL
592	FSL	520	FWL

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

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Current **Surface** Location **From** QtrQtr Lot 17 Sec 5

Twp <u>7N</u>	Range <u>89W</u>	Meridian <u>6</u>
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New **Surface** Location **To** QtrQtr \_\_\_\_\_ Sec \_\_\_\_\_

Twp _____	Range _____	Meridian _____
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Change of **Top of Productive Zone** Footage **From** Exterior Section Lines:

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

680	FSL	680	FWL	**
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Current **Top of Productive Zone** Location **From** Sec \_\_\_\_\_

Twp _____	Range _____
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New **Top of Productive Zone** Location **To** Sec 5

Twp <u>7N</u>	Range <u>89W</u>
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Change of **Bottomhole** Footage **From** Exterior Section Lines:

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

1940	FSL	700	FWL	**
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Current **Bottomhole** Location Sec \_\_\_\_\_ Twp \_\_\_\_\_

Range _____	** attach deviated drilling plan
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New **Bottomhole** Location Sec 32 Twp 8N

Range <u>89W</u>
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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 06/21/2013

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 checked="" 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 type="checkbox"/> Other _____	<input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases	

COMMENTS:

Change Footages @ Top of Productive Zone  
Change Footages @ Bottom Hole  
Change Proposed TMD: FROM: 20,711' TO 17,344'  
Change Casing/Cement Designs  
Request Confidential Status

**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
First String	9	7		8	7	5		8	26.40	0	10250	575	10250	5500
1ST LINER	6	3		4	4	1		2	13.5	10150	17344	612	17344	10150
Second String	6	3		4	5	1		2	20	0	10150	50	10150	9150

**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.):

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:

**BMP**

Type

Comment

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Operator Comments:

[Empty box for Operator Comments]

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

Signed: \_\_\_\_\_ Print Name: Cindy Turner  
Title: Project Manager Email: cturner@axiaenergy.com Date: 6/20/2013

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

COGCC Approved: KRABACHER, JAY Date: 6/26/2013

**CONDITIONS OF APPROVAL, IF ANY:**

[Empty box for Conditions of Approval]

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Engineer	emailed OPR rep -- which TD is the actual one? 17461' or 17344? opr responded: 17344.	6/26/2013 3:52:13 PM
Permit	Operator has supplied new Deviated Drilling Plan, updated TPZ and BHL information, as well as supplied Communitization map.	6/20/2013 1:18:05 PM

Total: 2 comment(s)

**Attachment Check List**

<b><u>Att Doc Num</u></b>	<b><u>Name</u></b>
2622610	MINERAL LEASE MAP
400436826	FORM 4 SUBMITTED
400436841	DIRECTIONAL DATA

Total Attach: 3 Files