

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: 400434051			

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: 96155 Contact Name Michael Brown
 Name of Operator: WHITING OIL AND GAS CORPORATION Phone: (307) 237-9310
 Address: 1700 BROADWAY STE 2300 Fax: ()
 City: DENVER State: CO Zip: 80290 Email: ml_brown@bresnan.net

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 123 36773 00 OGCC Facility ID Number: 431783
 Well/Facility Name: Razor Well/Facility Number: 27-3424H
 Location QtrQtr: NESW Section: 27 Township: 10N Range: 58W Meridian: 6
 County: WELD 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:

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

Current **Surface** Location **From** QtrQtr NESW Sec 27

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

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

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

Current **Top of Productive Zone** Location **From** Sec 27

New **Top of Productive Zone** Location **To** Sec 27

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

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

Current **Bottomhole** Location Sec 34 Twp 10N

New **Bottomhole** Location Sec 34 Twp 10N

Is location in High Density Area? No

Distance, in feet, to nearest building 3709, public road: 1980, above ground utility: 3683, railroad: 5280,

property line: 331, lease line: 0, well in same formation: 222

Ground Elevation 4751 feet Surface owner consultation date 03/20/2013

FNL/FSL		FEL/FWL	
<u>2321</u>	<u>FSL</u>	<u>1980</u>	<u>FWL</u>
_____	_____	_____	_____
Twp <u>10N</u>	Range <u>58W</u>	Meridian <u>6</u>	
Twp _____	Range _____	Meridian _____	
<u>1801</u>	<u>FSL</u>	<u>1986</u>	<u>FWL</u>
<u>1810</u>	<u>FSL</u>	<u>2082</u>	<u>FWL</u>
Twp <u>10N</u>	Range <u>58W</u>		
Twp <u>10N</u>	Range <u>58W</u>		
<u>660</u>	<u>FSL</u>	<u>1980</u>	<u>FWL</u>
<u>600</u>	<u>FSL</u>	<u>2145</u>	<u>FWL</u>
Range <u>58W</u>			
Range <u>58W</u>			

**

**

** attach deviated drilling plan

CHANGE OR ADD OBJECTIVE FORMATION AND/OR SPACING UNIT

<u>Objective Formation</u>	<u>Formation Code</u>	<u>Spacing Order Number</u>	<u>Unit Acreage</u>	<u>Unit Configuration</u>
NIOBRARA	NBRR	535-314	960	S/2 27, All 34

OTHER CHANGES

☐ **REMOVE FROM SURFACE BOND** Signed surface use agreement is a required attachment

☒ **CHANGE OF WELL, FACILITY OR OIL & GAS LOCATION NAME OR NUMBER**

From: Name RAZOR Number 27-3424H Effective Date: 06/15/2013

To: Name RAZOR Number 27K-3407A

☐ **ABANDON PERMIT: Permit can only be abandoned if the permitted operation has NOT been conducted. Field inspection will be conducted to verify site status.**

☐ WELL: Abandon Application for Permit-to-Drill (Form2) – Well API Number _____ has not been drilled.

☐ PIT: Abandon Earthen Pit Permit (Form 15) – COGCC Pit Facility ID Number _____ has not been constructed (Permitted and constructed pit requires closure per Rule 905)

☐ CENTRALIZED E&P WASTE MANAGEMENT FACILITY: Abandon Centralized E&P Waste Management Facility Permit (Form 28) – Facility ID Number _____ has not been constructed (Constructed facility requires closure per Rule 908)

OIL & GAS LOCATION ID Number: _____

☐ Abandon Oil & Gas Location Assessment (Form 2A) – Location has not been constructed and site will not be used in the future.

☐ Keep Oil & Gas Location Assessment (Form 2A) active until expiration date. This site will be used in the future.

Surface disturbance from Oil and Gas Operations must be reclaimed per Rule 1003 and Rule 1004.

☒ **REQUEST FOR CONFIDENTIAL STATUS**

☐ **DIGITAL WELL LOG UPLOAD**

☒ **DOCUMENTS SUBMITTED** Purpose of Submission: Revise Plats, Drilling Plan, Deviated Drilling Plan

RECLAMATION**INTERIM RECLAMATION**

☒ Interim Reclamation will commence approximately 12/15/2013

Per Rule 1003.e.(3) operator shall submit Sundry Notice reporting interim reclamation is complete and site is ready for inspection when vegetation reaches 80% coverage.

☐ Interim reclamation complete, site ready for inspection.

Per Rule 1003.e(3) describe interim reclamation procedure in Comments below or provide as an attachment and attach required location photographs.

Field inspection will be conducted to document Rule 1003.e. compliance

FINAL RECLAMATION

☐ Final Reclamation will commence approximately _____

Per Rule 1004.c.(4) operator shall submit Sundry Notice reporting final reclamation is complete and site is ready for inspection when vegetation reaches 80% coverage.

☐ Final reclamation complete, site ready for inspection. Per Rule 1004.c(4) describe final reclamation procedure in Comments below or provide as an attachment.

Field inspection will be conducted to document Rule 1004.c. compliance

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 07/01/2013

☐ 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:

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
Conductor casing	16	1		16	16				65	0	80			
Surface String	13	1		2	9	5		8	36	0	1500	719	1500	0
First String	8	3		4	7				29	0	6200	433	6200	0
1ST LINER	6				4	1		2	11.6	5146	12480			

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:

Best Management Practices

<u>No</u>	<u>BMP/COA Type</u>	<u>Description</u>
1	Storm Water/Erosion Control	Stormwater management plans (SWMP) are in place to address construction, drilling and operations associated with oil and gas development throughout the State of Colorado. BMPs will be constructed as necessary to prevent stormwater from leaving the construction site. BMPs used will vary according to the location, and will remain until the pad is reclaimed.
2	Material Handling and Spill Prevention	Spill Prevention Control and Countermeasures (SPCC) plans are in place to address any possible spill associated with oil and gas operations throughout the State of Colorado. <ul style="list-style-type: none">• Materials and fluids will be stored in a neat and orderly fashion.• Waste will be collected regularly and disposed of at an offsite facility.• Prompt cleanup is required of spills to minimize waste materials entering the stormwater runoff.• Drip pans will be used during fueling and maintenance to contain spills or leaks.• Cleanup of trash and discarded material will be done at the end of the work day.• Cleanup will consist of monitoring the road, location and any other work areas.• Material to be cleaned up includes trash, scrap, and contaminated soil.

Total: 2 comment(s)

Operator Comments:

The casing will be driven. There are no existing wells within 500 feet of the well bore. Wells Planned within 500 feet are shown on the multi-well plan map.

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

Signed: _____ Print Name: Michael Brown
Title: _____ Email: ml_brown@bresnan.net Date: 6/15/2013

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

COGCC Approved: SUTPHIN, DIRK Date: 8/8/2013

CONDITIONS OF APPROVAL, IF ANY:**COA Type****Description**

	Evaluated any existing wells within 1500' of proposed directional.
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General Comments**User Group****Comment****Comment Date**

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Total: 0 comment(s)

Attachment Check List**Att Doc Num****Name**

400434051	FORM 4 SUBMITTED
400434100	WELL LOCATION PLAT
400434101	OTHER
400434102	DEVIATED DRILLING PLAN
400434103	DIRECTIONAL DATA

Total Attach: 5 Files