

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:

400471367

Date Received:

10/12/2013

## 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 Will Lambert  
 Name of Operator: WHITING OIL AND GAS CORPORATION Phone: (303) 837-4238  
 Address: 1700 BROADWAY STE 2300 Fax: (720) 644-3637  
 City: DENVER State: CO Zip: 80290 Email: william.lambert@whiting.com

Complete the Attachment  
Checklist

OP OGCC

API Number : 05- 123 36702 00 OGCC Facility ID Number: 431631  
 Well/Facility Name: Horsetail Well/Facility Number: 18-0713H  
 Location QtrQtr: SWSW Section: 18 Township: 10N Range: 57W Meridian: 6  
 County: WELD Field Name: WILDCAT  
 Federal, Indian or State Lease Number: \_\_\_\_\_

Survey Plat

Directional Survey

Srvc Eqpmt Diagram

Technical Info Page

Other

## GROUND WATER SAMPLING

## Uses of Ground Water Sampling Section

Request an Exception to Ground Water Sampling Requirements in Greater Wattenberg Area Rule 318A.e(4) or in Statewide Rule 609.c.  
 Request a Previously Sampled Water Source in the COGIS database be used to meet sampling requirements as described in Rule 609.d.  
 (3).

**NOTE: If this Sundry Notice is being submitted to request a Ground Water Sampling Exception it cannot be used for any other purpose except requesting the use of a Previously Sampled Water Source in the COGIS database.**

- ☐ Request an Exception to Ground Water Sampling Requirements per Greater Wattenberg Area Rule 318A.e(4): There are no Available Water Sources located within the governmental quarter section or within a previously unsampled governmental quarter section within a ½-mile radius of this proposed Oil and Gas Well, Multi-Well Site, or Dedicated Injection Well.
- ☒ Request an Exception to Ground Water Sampling Requirements per Statewide Rule 609.c.
- 1 Number of Water Sources located within one-half (1/2) mile of a proposed Oil and Gas Well, Multi-Well Site, or Dedicated Injection Well.
- 3 Number of Water Source Exceptions requested per Rule 609.c.
- 0 Number of Water Sources determined to be unsuitable. **The condition of these Water Sources MUST be documented in the comments below or in an attachment.**
- 0 Number of Water Sources suitable for testing whose owners refused to grant access despite an operator's reasonable good faith efforts to obtain consent to conduct sampling.  
**The reasonable good faith efforts used to obtain access from the owners of these Water Sources MUST be documented in the comments below or in an attachment.**
- ☐ Request a Previously Sampled Water Source in the COGIS database be used to meet sampling requirements as described in Rule 609.d(3)

Type of Sample Substitution Request

Enter Sample ID Number from COGIS Maps for each Previous Water Sample:

Sample ID	Facility ID	Sample Date	Sample Purpose

**COMMENTS**

There is only one Water Source located within one-half (1/2) mile of the proposed Oil and Gas Well. The Water Source was sampled on July 18, 2013.

**Operator Comments:**

There is only Water Source located within one-half (1/2) mile of the proposed Oil and Gas Well. The Water Source was sampled on July 18, 2013.

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

Signed: \_\_\_\_\_ Print Name: Will Lambert  
Title: Env. Professional II Email: william.lambert@whiting.com Date: 10/12/2013

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

COGCC Approved: KOEPESELL, ARTHUR Date: 10/16/2013

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

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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**

400471367	FORM 4 SUBMITTED
400471386	REFERENCE AREA MAP

Total Attach: 2 Files