

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: <u>400540256</u>			
Date Received: <u>01/17/2014</u>			

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: 100322 Contact Name Jan Kajiwara
 Name of Operator: NOBLE ENERGY INC Phone: (303) 228-4092
 Address: 1625 BROADWAY STE 2200 Fax: (303) 228-4286
 City: DENVER State: CO Zip: 80202 Email: jkajiwara@nobleenergyinc.com

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 123 38676 00 OGCC Facility ID Number: 435576
 Well/Facility Name: Wells Ranch Well/Facility Number: AE30-68-1BHNA
 Location QtrQtr: NWNW Section: 29 Township: 6N Range: 62W Meridian: 6
 County: WELD Field Name: WATTENBERG
 Federal, Indian or State Lease Number: _____

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 40.464020 PDOP Reading 1.3 Date of Measurement 08/01/2013
 Longitude -104.355970 GPS Instrument Operator's Name Brian T Brinkman

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 NWNW Sec 29 Twp 6N Range 62W Meridian 6
 New **Surface** Location **To** QtrQtr NWNW Sec 29 Twp 6N Range 62W Meridian 6

Change of **Top of Productive Zone** Footage **From** Exterior Section Lines: 1148 FNL 779 FEL
 Change of **Top of Productive Zone** Footage **To** Exterior Section Lines: 1146 FNL 778 FEL **

Current **Top of Productive Zone** Location **From** Sec 30 Twp 6N Range 62W
 New **Top of Productive Zone** Location **To** Sec 30 Twp 6N Range 62W

Change of **Bottomhole** Footage **From** Exterior Section Lines: 1155 FNL 385 FEL
 Change of **Bottomhole** Footage **To** Exterior Section Lines: _____ **

Current **Bottomhole** Location Sec 25 Twp 6N Range 63W ** attach deviated drilling plan
 New **Bottomhole** Location Sec _____ Twp _____ Range _____

Is location in High Density Area? No

Distance, in feet, to nearest building 361, public road: 5280, above ground utility: 5280, railroad: 5280,
 property line: 65, lease line: 0, well in same formation: 330

Ground Elevation 4775 feet Surface owner consultation date 05/04/2013

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 01/27/2014

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:

Noble respectfully requests approval to change the surface hole for reduction of density in this area. The Lease, Spacing, and Pooling information & casing point a BHL locations will not change. A revised plat, directional plan, directional data spreadsheet are attached. TMD changes from 11933 to 11930. Offset wells were re-evaluated: new offset spreadsheet attached. Nearest well = Wells Ranch USX AA25-67HN.

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	18	1		2	16	0		0	0	0	100	6	100	0
Surface String	13	3		4	9	5		8	36	0	550	270	550	0
First String	8	3		4	7	0		0	26	0	6944	470	6944	
1ST LINER	6	1		8	4	1		2	11.6	6794	11930			

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:

<u>Best Management Practices</u>	
<u>No BMP/COA Type</u>	<u>Description</u>

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: Jan Kajiwara
Title: Regulatory Analyst III Email: regulatorynotification@nobleenergyinc.co Date: 1/17/2014

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

COGCC Approved: HICKEY, MIKE Date: 2/10/2014

CONDITIONS OF APPROVAL, IF ANY:

<u>COA Type</u>	<u>Description</u>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Change in SHL will not impace pad size, design, or layout.	1/24/2014 11:29:09 AM

Total: 1 comment(s)

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400540256	FORM 4 SUBMITTED
400540482	WELL LOCATION PLAT
400540489	DEVIATED DRILLING PLAN
400541779	DIRECTIONAL DATA
400541793	OFFSET WELL EVALUATION

Total Attach: 5 Files