

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>400573144</u>			
Date Received: <u>03/18/2014</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: <u>96155</u>	Contact Name <u>Erin Ekblad</u>
Name of Operator: <u>WHITING OIL AND GAS CORPORATION</u>	Phone: <u>(303) 876-7053</u>
Address: <u>1700 BROADWAY STE 2300</u>	Fax: <u>()</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80290</u>	Email: <u>erin.ekblad@whiting.com</u>

Complete the Attachment
Checklist

OP OGCC

API Number : <u>05-</u> <u>103</u> <u>11411</u> <u>00</u>	OGCC Facility ID Number: <u>299484</u>
Well/Facility Name: <u>Boies</u>	Well/Facility Number: <u>B-30H-I2</u>
Location QtrQtr: <u>NESE</u> Section: <u>30</u> Township: <u>2S</u> Range: <u>97W</u> Meridian: <u>6</u>	
County: <u>RIO BLANCO</u> Field Name: <u>SULPHUR CREEK</u>	
Federal, Indian or State Lease Number: <u></u>	

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: (Vertical, Directional, Horizontal)Change of **Surface** Footage **From** Exterior Section Lines:Change of **Surface** Footage **To** Exterior Section Lines:Current **Surface** Location **From** QtrQtr NESE Sec 30New **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 30New **Top of Productive Zone** Location **To** Sec Change of **Bottomhole** Footage **From** Exterior Section Lines:Change of **Bottomhole** Footage **To** Exterior Section Lines:Current **Bottomhole** Location Sec 30 Twp T2SNew **Bottomhole** Location Sec Twp 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

FNL/FSL		FEL/FWL	
<u>2097</u>	<u>FSL</u>	<u>1254</u>	<u>FEL</u>
<u></u>	<u></u>	<u></u>	<u></u>
Twp <u>2S</u>	Range <u>97W</u>	Meridian <u>6</u>	
Twp <u></u>	Range <u></u>	Meridian <u></u>	
<u>2125</u>	<u>FSL</u>	<u>621</u>	<u>FEL</u>
<u></u>	<u></u>	<u></u>	<u></u>
Twp <u>2S</u>	Range <u>97W</u>		
Twp <u></u>	Range <u></u>		
<u>2125</u>	<u>FSL</u>	<u>621</u>	<u>FEL</u>
<u></u>	<u></u>	<u></u>	<u></u>
Twp <u>T2S</u>	Range <u>R97W</u>		
Twp <u></u>	Range <u></u>		

**

**

** attach deviated drilling plan

CHANGE OR ADD OBJECTIVE FORMATION AND/OR SPACING UNIT				
Objective Formation	Formation Code	Spacing Order Number	Unit Acreage	Unit Configuration

CHANGE OR ADD OBJECTIVE FORMATION AND/OR SPACING UNIT				
Objective Formation	Formation Code	Spacing Order Number	Unit Acreage	Unit Configuration

OTHER CHANGES

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

To:	Name	Number
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- ☐ 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)

- OIL & GAS LOCATION ID Number:

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

- ## DIGITAL WELL LOG UPLOAD

- ## RECLAMATION

☐ Interim Reclamation will commence approximately

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 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 03/31/2014

☐ 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 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>Plug Conductor</u> | <input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases | |

COMMENTS:

Whiting Oil and Gas Corporation plans to fill conductor pipe with cement. Whiting will cut off conductor pipe four feet below grade and weld ID cap. (2.0 cubic yards of cement per conductor)

Extra details: 20" diameter, 80' deep and they will be filled to with-in 4' of the surface and cut off 4' below grade.

Whiting Oil and Gas Corporation would also like to note that the pads will not be reclaimed at this time. Whiting owns the surface out on these pads and we have the right to continue to be responsible custodians of the land.

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.):

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>

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: Erin Ekblad

Title: Regulatory Analyst

Email: erin.ekblad@whiting.com

Date: 3/18/2014

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

COGCC Approved: YOKLEY, BILL

Date: 3/20/2014

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>
Routing Review	Routed to engineering.	3/20/2014 5:41:01 AM
Total: 1 comment(s)		

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400573144	FORM 4 SUBMITTED
Total Attach: 1 Files	