

# State of Colorado Oil and Gas Conservation Commission

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DE	ET	OE	ES
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## 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: 10261 Contact Name Sonia Stephens

Name of Operator: BAYSWATER EXPLORATION AND PRODUCTION LLC Phone: (303) 928-7128

Address: 730 17TH ST STE 610 Fax: (303) 218-5678

City: DENVER State: CO Zip: 80202 Email: regulatory@petro-fs.com

Complete the Attachment  
Checklist

OP OGCC

API Number : 05- 123 36076 00 OGCC Facility ID Number: 430176

Well/Facility Name: Booth Well/Facility Number: 41-26

Location QtrQtr: NWNE Section: 26 Township: 7N Range: 65W Meridian: 6

County: WELD Field Name: WATTENBERG

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 40.551693 PDOP Reading 1.3 Date of Measurement 03/24/2012  
Longitude -104.628714 GPS Instrument Operator's Name Brian Ritz

### 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 NWNE Sec 26

New **Surface** Location **To** QtrQtr NWNE Sec 26

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 26

New **Top of Productive Zone** Location **To** Sec 26

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

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

Current **Bottomhole** Location Sec 26 Twp 7N

New **Bottomhole** Location Sec 26 Twp 7N

Is location in High Density Area? No

Distance, in feet, to nearest building 624, public road: 624, above ground utility: 624, railroad: 624,  
property line: 405, lease line: \_\_\_\_\_, well in same formation: 849

Ground Elevation 4891 feet Surface owner consultation date \_\_\_\_\_

FNL/FSL		FEL/FWL	
439	FNL	2265	FEL
16	FNL	2264	FEL
Twp <u>7N</u>	Range <u>65W</u>	Meridian <u>6</u>	
Twp <u>7N</u>	Range <u>65W</u>	Meridian <u>6</u>	
1475	FNL	87	FEL
465	FNL	1847	FEL
Twp <u>7N</u>	Range <u>65W</u>		
Twp <u>7N</u>	Range <u>65W</u>		
1453	FNL	75	FEL
465	FNL	1875	FEL
Range <u>65W</u>			
Range <u>65W</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		160	GWA

**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 BOOTH Number 41-26 Effective Date: 01/18/2014

To: Name Booth Number K-26H

☐ **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: \_\_\_\_\_

**RECLAMATION****INTERIM RECLAMATION**

☐ Interim Reclamation will commence approximately \_\_\_\_\_

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 02/12/2014

☐ 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:

Changing existing well from Directional to Horizontal, and changing well name.

#### 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
Surface String	12	1		4	9	5		8	36	0	700	372	700	0
First String	8	3		4	7				26	0	7635	574	7635	0
1ST LINER	6	1		8	4	1		2	11.6	6635	11984			

#### 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**

<b><u>No</u></b>	<b><u>BMP/COA Type</u></b>	<b><u>Description</u></b>
1	Drilling/Completion Operations	<p>Bradenhead Monitoring BMP</p> <p>Pursuant to COGCC 207.a. ("Policy"), Bayswater Exploration &amp; Production, LLC, acknowledges and will comply with said policy for Bradenhead Monitoring during hydraulic fracturing treatments in the Greater Wattenberg Area (GWA), dated May 29, 2012.</p>
2	Drilling/Completion Operations	<p>Anti-Collision BMP</p> <p>Prior to drilling operations, Operator may perform an anti-collision review of existing offset wells that have the potential of being within close proximity of the proposed well. This anti-collision review may include MWD or gyro surveys and surface locations of the offset wells with included error of uncertainty per survey instrument, and compared against the proposed well path with its respective error of uncertainty. If current surveys do not exist for the offset wells, Operator may have gyro surveys conducted to verify bottom hole location. The proposed well may only be drilled if the anti-collision review results indicate that the risk of collision is sufficiently low as defined by the anti-collision plan, with separation factors greater than 1.5, or if the risk of collision has been mitigated through other means including shutting in wells, plugging wells, increased drilling fluid in the event of lost returns or as is appropriate for the specific situation. In the event of an increased risk of collision, that risk will be mitigated to prevent harm to people, the environment or property. For the proposed well, upon conclusion of drilling operations, an as-constructed directional survey will be submitted to the COGCC with the Form 5.</p>

Total: 2 comment(s)

**Operator Comments:**

Operator has approved Form 2A Document # 400411142.

Operator is changing the Directional well to Horizontal and also the name of the well. Directional data and deviated drilling plans are attached. Rule 318A.a. and Rule 318A.e.(6) 30 Day mineral owner notifications have been sent and Operator received signed waivers from the remaining owners; these letters are on file in Bayswater's office.

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

Signed: \_\_\_\_\_ Print Name: Sonia Stephens  
 Title: Regulatory Technician Email: regulatory@petro-fs.com Date: 2/28/2014

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

COGCC Approved: SCHLAGENHAUF, MARK Date: 3/28/2014

**CONDITIONS OF APPROVAL, IF ANY:**

**COA Type**

**Description**

	Operator acknowledges the proximity of the listed non-producing wells. Operator agrees to provide mitigation Option 3 (per the DJ Basin Horizontal Offset Policy), ensure all applicable documentation is submitted, and submit Form 42(s) "OFFSET MITIGATION COMPLETED" for the remediated wells, referencing the API Number of the proposed horizontal well(s) stating what appropriate mitigation occurred and that it has been completed, prior to the hydraulic stimulation of this well.  Gustafson 1 (API 123-05306)
	1) Submit Form 42 electronically to COGCC 48 hours prior to MIRU. 2) Comply with Rule 317.i and provide cement coverage from end of 7" casing to a minimum of 200' above Niobrara. Verify coverage with cement bond log. 3) Comply with Rule 321. Run and submit Directional Survey from TD to base of surface casing. Ensure that the wellbore complies with setback requirements in commission orders or rules prior to producing the well.

**General Comments**

**User Group**

**Comment**

**Comment Date**

Permit	Received new deviated drilling plan and data. Footages are greater than 460' from boundaries. Ready to pass.	3/24/2014 11:26:54 AM
Permit	Received and attached Offset Well Evaluation spreadsheet. Received and attached PSU for this well only (original attachment included all 5 wells). Received and attached 318A.m waiver for Booth 10-26. Added anti-collision and Bradenhead Monitoring BMPs. WO resolution of TPZ footage.	3/10/2014 2:16:58 PM
Permit	GPS location is the same as permitted location. Section was resurveyed and footages have changed. Added unit acreage and unit configuration. Requested 318A.m variance request letter for Booth 6-26. Requested offset well evaluation spreadsheet. TPZ calculates to 426 FNL 1786 FEL. Too close to PSU northern and eastern boundaries.	3/7/2014 9:09:24 AM

Total: 3 comment(s)

## **Attachment Check List**

<b><u>Att Doc Num</u></b>	<b><u>Name</u></b>
2114546	OFFSET WELL EVALUATION
2114547	PROPOSED SPACING UNIT
2114548	VARIANCE REQUEST
2114566	DEVIATED DRILLING PLAN
400538606	FORM 4 SUBMITTED
400554282	WELL LOCATION PLAT
400566027	DIRECTIONAL DATA
400577383	DIRECTIONAL DATA

Total Attach: 8 Files