

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: <u>10459</u>	Contact Name <u>Sonia Stephens</u>
Name of Operator: <u>EXTRACTION OIL & GAS LLC</u>	Phone: <u>(303) 928-7128</u>
Address: <u>1888 SHERMAN ST #200</u>	Fax: <u>(303) 218-5678</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80203</u>	Email: <u>regulatory@petro-fs.com</u>

Complete the Attachment
Checklist

OP OGCC

API Number : <u>05-123 37044 00</u>	OGCC Facility ID Number: <u>432259</u>
Well/Facility Name: <u>HINER</u>	Well/Facility Number: <u>42-36</u>
Location QtrQtr: <u>NENE</u> Section: <u>36</u> Township: <u>6N</u> Range: <u>66W</u> Meridian: <u>6</u>	
County: <u>WELD</u> Field Name: <u>WATTENBERG</u>	
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 40.449146 PDOP Reading 1.4 Date of Measurement 01/22/2014
Longitude -104.719084 GPS Instrument Operator's Name Tommy Burden

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 NENE Sec 36

New **Surface** Location **To** QtrQtr NENE Sec 36

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 36

New **Top of Productive Zone** Location **To** Sec 36

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

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

Current **Bottomhole** Location Sec 36 Twp 6N

New **Bottomhole** Location Sec 36 Twp 6N

Is location in High Density Area? Yes

Distance, in feet, to nearest building 568, public road: 600, above ground utility: 558, railroad: 5280,

property line: 314, lease line: 336, well in same formation: 180

Ground Elevation 4661 feet Surface owner consultation date _____

FNL/FSL		FEL/FWL	
<u>858</u>	<u>FNL</u>	<u>734</u>	<u>FEL</u>
<u>1044</u>	<u>FNL</u>	<u>901</u>	<u>FEL</u>
Twp <u>6N</u>	Range <u>66W</u>	Meridian <u>6</u>	
Twp <u>6N</u>	Range <u>66W</u>	Meridian <u>6</u>	
<u>1987</u>	<u>FNL</u>	<u>656</u>	<u>FEL</u>
<u>2648</u>	<u>FNL</u>	<u>460</u>	<u>FEL</u>
Twp <u>6N</u>	Range <u>66W</u>		
Twp <u>6N</u>	Range <u>66W</u>		
<u>1987</u>	<u>FNL</u>	<u>656</u>	<u>FEL</u>
<u>2677</u>	<u>FNL</u>	<u>460</u>	<u>FWL</u>
Range <u>66W</u>			
Range <u>66W</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>
CODELL	CODL		320	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 HINER Number 42-36 Effective Date: 03/12/2014

To: Name HINER Number 36C-24W

☐ **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 03/12/2014

☐ 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:

The well is now planned as a Horizontal Well.

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	750	360	750	0
First String	8	3		4	7				26	0	7600	925	7600	0
1ST LINER	6	1		8	4	1		2	13.5	7500	11972	0		0

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

No BMP/COA Type

Description

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Operator Comments:

Applying for a spacial order. Hearing is set March 17, 2014. The well is now planned as a Horizontal well. Surface Use Agreement is attached concerning specifically to the Location Waiver addressing Rule 318A.a Surface Owner Exception Location in GWA. It is highlighted and in Section 15.
Rule 318.A.e PSU Letter to Director is attached as " Correspondence".

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: 3/21/2014

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: 4/18/2014

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

	Open hole resistivity and gamma logs shall be run to describe the stratigraphy of the entire wellbore and to adequately verify the setting depth of surface casing and aquifer coverage. On a multi-well pad, these open hole logs are only required on one of the first wells drilled on the pad and the Drilling Completion Report - Form 5 for every well on the pad shall identify which well was logged.
	Operator must comply with COGCC Policy for Bradenhead Monitoring During Hydraulic Fracturing Treatments in the Greater Wattenberg Area dated May 29, 2012.
	Operator shall comply with Buffer Zone Move-In, Rig-Up Notice Policy dated 12-16-2013.
	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.
	Operator acknowledges the proximity of the listed non-operated wells. Operator agrees to provide mitigation Option 1 or 2 (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. Kissler-Amen et al 1-25 (API 123-11462) Monfort 34-25 (API 123-11680)

General Comments**User Group****Comment****Comment Date**

Permit	Hiner 36 Pad 2A, docnum 400571188, approved.	4/18/2014 1:00:31 PM
Permit	Objective formation is Codell per operator.	3/25/2014 3:54:16 PM
Permit	Attached Buffer Zone Notification letter and LGD Notification letter. Spacing information missing. Waiting on objective formation. This sundry can be passed when the Hiner 36 Pad 2A, docnum 400571188, is approved.	3/25/2014 3:31:14 PM

Total: 3 comment(s)

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

2114569	OTHER
2114570	LGD CONSULTATION
400570745	FORM 4 SUBMITTED
400570778	DEVIATED DRILLING PLAN
400570783	WELL LOCATION PLAT
400570787	DIRECTIONAL DATA
400572139	OFFSET WELL EVALUATION
400572679	EXCEPTION LOC WAIVERS
400574467	EXCEPTION LOC REQUEST
400576565	PROPOSED SPACING UNIT

Total Attach: 10 Files