

**State of Colorado**  
**Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109



DE	ET	OE	ES
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Date Received:			

**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: 10456 Contact Name Shauna DeMattee  
 Name of Operator: CAERUS PICEANCE LLC Phone: (720) 299-4495  
 Address: 600 17TH STREET #1600N Fax: ( )  
 City: DENVER State: CO Zip: 80202 Email: sdemattee@progressivepcs.net

Complete the Attachment  
Checklist  
  
OP OGCC

API Number : 05- 045 22395 00 OGCC Facility ID Number: 437040  
 Well/Facility Name: ISLAND RANCH Well/Facility Number: 21D-24  
 Location QtrQtr: LOT 11 Section: 13 Township: 7S Range: 96W Meridian: 6  
 County: GARFIELD Field Name: PARACHUTE  
 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 39.433736 PDOP Reading 1.6 Date of Measurement 02/20/2014  
 Longitude -108.064225 GPS Instrument Operator's Name Robert L. Kay

**LOCATION CHANGE (all measurements in Feet)**

Well will be: DIRECTIONAL (Vertical, Directional, Horizontal)

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

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

Current **Surface** Location **From** QtrQtr LOT 11 Sec 13

New **Surface** Location **To** QtrQtr LOT 11 Sec 13

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 24

New **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 24 Twp 7S

New **Bottomhole** Location Sec \_\_\_\_\_ Twp \_\_\_\_\_

Is location in High Density Area? No

Distance, in feet, to nearest building 1978, public road: 946, above ground utility: 2041, railroad: 873,

property line: 961, lease line: \_\_\_\_\_, well in same formation: \_\_\_\_\_

Ground Elevation 5056 feet Surface owner consultation date 02/10/2014

FNL/FSL		FEL/FWL	
<u>1279</u>	<u>FSL</u>	<u>1065</u>	<u>FWL</u>
<u>1287</u>	<u>FSL</u>	<u>1063</u>	<u>FWL</u>
Twp <u>7S</u>	Range <u>96W</u>	Meridian <u>6</u>	
Twp <u>7S</u>	Range <u>96W</u>	Meridian <u>6</u>	
<u>1100</u>	<u>FNL</u>	<u>1980</u>	<u>FWL</u>
_____	_____	_____	_____
Twp <u>7S</u>	Range <u>96W</u>		
Twp _____	Range _____		
<u>1100</u>	<u>FNL</u>	<u>1980</u>	<u>FWL</u>
_____	_____	_____	_____
Twp <u>7S</u>	Range <u>96W</u>		
Twp _____	Range _____		

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\*\* attach deviated drilling plan



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 06/03/2014

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:

**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

**No BMP/COA Type**

**Description**



Operator Comments:

This Form 4 sundry is being submitted to modify the SHL for the subject well. The SHL has been modified for anti-collision purposes. The proposed SHL will not impact the design or size of the built pad. There have been no changes to the BHL, mineral lease information, or casing and cement program. The cultural distances have been updated for the revised SHL. Please refer to the attached revised location plat, deviated drilling plan, and directional data for revisions.

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

Signed: \_\_\_\_\_ Print Name: Shauna DeMattee  
Title: Permit Representative Email: sdemattee@progressivepcs.net Date: \_\_\_\_\_

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

COGCC Approved: \_\_\_\_\_ Date: \_\_\_\_\_

### CONDITIONS OF APPROVAL, IF ANY:

### General Comments

**User Group**

**Comment**

**Comment Date**



Total: 0 comment(s)

### Attachment Check List

**Att Doc Num**

**Name**

400618371	WELL LOCATION PLAT
400618395	DIRECTIONAL DATA
400618397	DEVIATED DRILLING PLAN

Total Attach: 3 Files