

State of Colorado Oil and Gas Conservation Commission

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DE	ET	OE	ES
Document Number: 400672189			
Date Received: 08/26/2014			

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: 10396 Contact Name Cheryl Rowell
 Name of Operator: SOUTHWESTERN ENERGY PRODUCTION COMPANY Phone: (281) 618-7439
 Address: 2350 N SAM HOUSTON PKWY EAST #125 Fax: ()
 City: HOUSTON State: TX Zip: 77032 Email: cheryl_rowell@swn.com

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 081 07811 00 OGCC Facility ID Number: 438579
 Well/Facility Name: WELKER 6-92 Well/Facility Number: 1-2H11
 Location QtrQtr: SESE Section: 2 Township: 6N Range: 92W Meridian: 6
 County: MOFFAT Field Name: WILDCAT
 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 40.494431 PDOP Reading 1.3 Date of Measurement 07/23/2014
 Longitude -107.680236 GPS Instrument Operator's Name John Floyd

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 SESE Sec 2

New **Surface** Location **To** QtrQtr SESE Sec 2

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 2

New **Top of Productive Zone** Location **To** Sec 2

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

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

Current **Bottomhole** Location Sec 11 Twp 6N

New **Bottomhole** Location Sec 11 Twp 6N

Is location in High Density Area? No

Distance, in feet, to nearest building 3117, public road: 4945, above ground utility: 3550, railroad: 5280,

property line: 685, lease line: , well in same formation:

Ground Elevation 6501 feet Surface owner consultation date 04/25/2014

FNL/FSL		FEL/FWL	
660	FSL	785	FEL
685	FSL	787	FEL
Twp <u>6N</u>	Range <u>92W</u>	Meridian <u>6</u>	
Twp <u>6N</u>	Range <u>92W</u>	Meridian <u>6</u>	
87	FSL	1062	FEL
63	FSL	928	FEL
Twp <u>6N</u>	Range <u>92W</u>		
Twp <u>6N</u>	Range <u>92W</u>		
662	FSL	1257	FEL
661	FSL	1977	FEL
Range <u>92W</u>		** attach deviated drilling plan	
Range <u>92W</u>			

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

OTHER CHANGES			
<input type="checkbox"/>	REMOVE FROM SURFACE BOND	Signed surface use agreement is a required attachment	
<input type="checkbox"/>	CHANGE OF WELL, FACILITY OR OIL & GAS LOCATION NAME OR NUMBER		
From:	Name	WELKER 6-92	Number 1-2H11 Effective Date: _____
To:	Name	_____	Number _____
<input type="checkbox"/>	ABANDON PERMIT: Permit can only be abandoned if the permitted operation has NOT been conducted. Field inspection will be conducted to verify site status.		
<input type="checkbox"/>	WELL: Abandon Application for Permit-to-Drill (Form2) – Well API Number _____ has not been drilled.		
<input type="checkbox"/>	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)		
<input type="checkbox"/>	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: _____			
<input type="checkbox"/>	Abandon Oil & Gas Location Assessment (Form 2A) – Location has not been constructed and site will not be used in the future.		
<input type="checkbox"/>	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.			
<input type="checkbox"/>	REQUEST FOR CONFIDENTIAL STATUS		
<input type="checkbox"/>	DIGITAL WELL LOG UPLOAD		
<input checked="" type="checkbox"/>	DOCUMENTS SUBMITTED	Purpose of Submission: Attached Location Plat & Directional Plan Pkg.	

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 _____

☐ 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 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

<u>No</u>		<u>BMP/COA Type</u>	<u>Description</u>

Operator Comments:

Southwestern request to move the SHL 25' in order assure proper placement of the rig on location to allow for rig up/rig down desired traffic pattern.
Southwestern also request a change in the bottom hole location due to recent data captured while drilling/completing an adjacent well. There is no change to the objective formations.

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

Signed: _____ Print Name: Cheryl Rowell
Title: Sr. Staff Reg Analyst Email: cheryl_rowell@swn.com Date: 8/26/2014

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

COGCC Approved: _____ Date: _____

CONDITIONS OF APPROVAL, IF ANY:**General Comments**

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Returned to DRAFT, the operator provided the Well location plat, but the Deviated drilling plan and the directional data was not attached but was imported.	9/5/2014 7:22:03 AM
Permit	The Deviated drilling plan and directional data was supplied and imported. The Well location plat is no longer attached. Returned to DRAFT.	9/2/2014 5:09:41 AM
Permit	Returned to DRAFT, the Deviated drilling plan will not open and the directional data template was not imported.	8/28/2014 6:27:36 AM

Total: 3 comment(s)

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400672189	FORM 4 SUBMITTED
400676768	FORM 4 SUBMITTED
400678584	FORM 4 SUBMITTED
400680063	DEVIATED DRILLING PLAN

Total Attach: 4 Files