

State of Colorado Oil and Gas Conservation Commission

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



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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:	10447	Contact Name	Rob	Bleil
Name of Operator:	URSA OPERATING COMPANY LLC		Phone:	(970) 6259922
Address:	602 SAWYER STREET #710		Fax:	()
City:	HOUSTON	State:	TX	Zip: 77007
		Email:	rbleil@ursaresources.com	

Complete the Attachment
Checklist

OP OGCC

API Number :	05-	045	22416	00	OGCC Facility ID Number:	437236
Well/Facility Name:	BAT			Well/Facility Number:	34B-24-07-96	
Location	QtrQtr:	NESW	Section:	24	Township:	7S
					Range:	96W
					Meridian:	6
County:	GARFIELD		Field Name:	WILDCAT		
Federal, Indian or State Lease Number:	COC027825					

Survey Plat		
Directional Survey		
Srvc Eqpmt Diagram		
Technical Info Page		
Other		

GROUND WATER SAMPLING

Uses of Ground Water Sampling Section

Request an Exception to Ground Water Sampling Requirements in Greater Wattenberg Area Rule 318A.e(4) or in Statewide Rule 609.c. Request a Previously Sampled Water Source in the COGIS database be used to meet sampling requirements as described in Rule 609.d. (3).

NOTE: If this Sundry Notice is being submitted to request a Ground Water Sampling Exception it cannot be used for any other purpose except requesting the use of a Previously Sampled Water Source in the COGIS database.

- ☐ Request an Exception to Ground Water Sampling Requirements per Greater Wattenberg Area Rule 318A.e(4): There are no Available Water Sources located within the governmental quarter section or within a previously unsampled governmental quarter section within a 1/2-mile radius of this proposed Oil and Gas Well, Multi-Well Site, or Dedicated Injection Well.
- ☐ Request an Exception to Ground Water Sampling Requirements per Statewide Rule 609.c.
- _____ Number of Water Sources located within one-half (1/2) mile of a proposed Oil and Gas Well, Multi-Well Site, or Dedicated Injection Well.
- _____ Number of Water Source Exceptions requested per Rule 609.c.
- _____ Number of Water Sources determined to be unsuitable. **The condition of these Water Sources MUST be documented in the comments below or in an attachment.**
- _____ Number of Water Sources suitable for testing whose owners refused to grant access despite an operator's reasonable good faith efforts to obtain consent to conduct sampling.
- The reasonable good faith efforts used to obtain access from the owners of these Water Sources MUST be documented in the comments below or in an attachment.**
- ☒ Request a Previously Sampled Water Source in the COGIS database be used to meet sampling requirements as described in Rule 609.d(3)

Pre_Drill Type of Sample Substitution Request

Enter Sample ID Number from COGIS Maps for each Previous Water Sample:

Sample ID	Facility ID	Sample Date	Sample Purpose
536034	752877	06/06/2013	609Pre
536017	752879	06/06/2013	609Pre
536015	752880	06/12/2013	609Pre
536019	752878	06/06/2013	609Pre

COMMENTS

Ursa Operating Company (Ursa) is requesting four (4) previously sampled water sources to be used to meet pre drilling sampling requirements set forth in COGCC Rule 609. In addition to the API listed on this Form 4, the following API's applicable to this request are as listed;

API#:

045-20549

045-22105

045-22419

045-22424

045-22418

045-22417

045-22425

Operator Comments:

Please forward onto Arthur Koepsell for review.

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

Signed: _____ Print Name: Kris Rowe

Title: Env. Consultant Email: krowe@hrlcomp.com 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**

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
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Total: 0 comment(s)

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
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Total Attach: 0 Files