

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

1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
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DE	ET	OE	ES
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Date Received: <b>10/27/2014</b>			

**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: 7125 Contact Name Bob Beeman  
 Name of Operator: BEEMAN OIL & GAS LLC Phone: (435) 260-8616  
 Address: 418 COTTONWOOD LANE Fax: ( )  
 City: MOAB State: UT Zip: 84532 Email: robertbeeman@msn.com

Complete the Attachment  
Checklist  
  
OP OGCC

API Number : 05- 067 09099 00 OGCC Facility ID Number: 282621  
 Well/Facility Name: GLADYS Well/Facility Number: 1  
 Location QtrQtr: NENE Section: 14 Township: 33N Range: 12W Meridian: 6  
 County: LA PLATA Field Name: RED MESA  
 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 \_\_\_\_\_ PDOP Reading \_\_\_\_\_ Date of Measurement \_\_\_\_\_  
 Longitude \_\_\_\_\_ GPS Instrument Operator's Name \_\_\_\_\_

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

Well will be: \_\_\_\_\_ (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 14

New **Surface** Location **To** QtrQtr \_\_\_\_\_ Sec \_\_\_\_\_

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 \_\_\_\_\_

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 \_\_\_\_\_ Twp \_\_\_\_\_

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

Is location in High Density Area? \_\_\_\_\_

Distance, in feet, to nearest building \_\_\_\_\_, public road: \_\_\_\_\_, above ground utility: \_\_\_\_\_, railroad: \_\_\_\_\_,

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

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

FNL/FSL		FEL/FWL	
<u>652</u>	<u>FNL</u>	<u>650</u>	<u>FEL</u>
_____	_____	_____	_____
Twp <u>33N</u>	Range <u>12W</u>	Meridian <u>6</u>	
Twp _____	Range _____	Meridian _____	
_____	_____	_____	_____
_____	_____	_____	_____
Twp _____	Range _____		
Twp _____	Range _____		
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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\*\* attach deviated drilling plan



Comments:

A Surface Reseeding and Weed Treatment Plan is attached in response to COGCC Field Inspection # 669500334, dated 08/12/2014.

**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 \_\_\_\_\_

- Intent to Recomplete (Form 2 also required)
- Request to Vent or Flare
- E&P Waste Mangement Plan
- Change Drilling Plan
- Repair Well
- Beneficial Reuse of E&P Waste
- Gross Interval Change
- Rule 502 variance requested. Must provide detailed info regarding request.
- Other \_\_\_\_\_
- 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:**

A Surface Reseeding and Weed Treatment Plan is attached in response to COGCC Field Inspection # 669500334, dated 08/12/2014.

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

Signed: \_\_\_\_\_ Print Name: Don Hamilton  
Title: Permitting Agent Email: starpoint@etv.net Date: 10/27/2014

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

COGCC Approved: Arthur, Denise Date: 12/9/2014

**CONDITIONS OF APPROVAL, IF ANY:**

**COA Type**

**Description**

	COGCC inspector requests an explanation as to why areas infested with Russian knapweed will be flagged off and avoided during the reseeding effort. How will these areas be revegetated otherwise?
	The report states that there will be a comparison with the location and a "random adjacent area transect" to achieve 30% vegetation after a year to determine if contingency fertilizer, soil amendment, and mulching plans are needed. A random adjacent area transect would not be the best way to determine this because it is not what COGCC will use to determine reclamation success. We recommend using a reference area vegetation transect that is not random but contains soil and vegetation composition representative of pre-disturbance vegetation (excluding noxious weeds).
	COGCC Reclamation Specialists strongly recommend mulching the location at the time of seeding. Mulching is known to provide several benefits (such as increased soil moisture, microbial activity, decreased erosion, etc.) to reclamation locations.
	Herbicide weed treatment on newly seeded areas in spring after seed application will likely result in mortality of desirable germinating seedlings. We recommend mechanical weed treatment during this period and that herbicide treatment be delayed at least until young seedlings are established.
	Approval of this plan is an acknowledgement that the plan was received and is not an approval of the methods in the plan.

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>

Total: 0 comment(s)

**Attachment Check List**

<b><u>Att Doc Num</u></b>	<b><u>Name</u></b>
400717816	FORM 4 SUBMITTED
400717824	INTERIM RECLAMATION PROCEDURE

Total Attach: 2 Files