

State of Colorado Oil and Gas Conservation Commission

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DE	ET	OE	ES
Document Number: 400804848			
Date Received: 03/20/2015			

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: 10110 Contact Name Callie Fiddes
 Name of Operator: GREAT WESTERN OPERATING COMPANY LLC Phone: (303) 398-0550
 Address: 1801 BROADWAY #500 Fax: ()
 City: DENVER State: CO Zip: 80202 Email: regulatorypermitting@gwogco.com

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 123 38616 00 OGCC Facility ID Number: 435492
 Well/Facility Name: Tailholt FD Well/Facility Number: 11-380HN
 Location QtrQtr: NWNW Section: 11 Township: 6N Range: 67W Meridian: 6
 County: WELD Field Name: WATTENBERG
 Federal, Indian or State Lease Number:

Survey Plat		
Directional Survey		
Srvc Eqpm 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 40.508314 PDOP Reading 2.3 Date of Measurement 10/23/2014
 Longitude -104.868189 GPS Instrument Operator's Name Greg Weimer

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 NWNW Sec 11

New **Surface** Location **To** QtrQtr NWNW Sec 11

FNL/FSL		FEL/FWL	
<u>241</u>	<u>FNL</u>	<u>527</u>	<u>FWL</u>
<u>241</u>	<u>FNL</u>	<u>532</u>	<u>FWL</u>
Twp <u>6N</u>	Range <u>67W</u>	Meridian <u>6</u>	
Twp <u>6N</u>	Range <u>67W</u>	Meridian <u>6</u>	

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 11

New **Top of Productive Zone** Location **To** Sec 11

<u>460</u>	<u>FNL</u>	<u>1</u>	<u>FWL</u>
<u>50</u>	<u>FNL</u>	<u>460</u>	<u>FWL</u>
Twp <u>6N</u>	Range <u>67W</u>		
Twp <u>6N</u>	Range <u>67W</u>		
<u>470</u>	<u>FSL</u>	<u>1</u>	<u>FWL</u>
<u>50</u>	<u>FNL</u>	<u>470</u>	<u>FEL</u>

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

Range 67W ** attach deviated drilling plan
 Range 67W

Is location in High Density Area? No

Distance, in feet, to nearest building 414, public road: 227, above ground utility: 213, railroad: 2977,
 property line: 241, lease line: 460, well in same formation: 280

Ground Elevation 4875 feet Surface owner consultation date 05/16/2013

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>
NIOBRARA	NBRR		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 TAILHOLT FD Number 11-380HN Effective Date: 04/07/2015

To: Name Tailholt FD Number 11-002HN

☐ **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 04/07/2015

☐ 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:

Along with our change of drilling plans we'd also like to switch to synthetic based mud. We're using commercial disposal and the waste management plan has been attached.

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
Conductor casing	24				16				42	0	80	121	80	0
Surface String	13	1		2	9	5		8	36	0	1400	579	1400	0
First String	7	7		8	5	1		2	17	0	11931	1264	11931	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

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

Operator Comments:

This sundry is being submitted because we would like to change the orientation of these wells. The updated casing information reflects our intention for a monobore design. We'd also like to plan to use synthetic based mud.

Old waste management plan would not delete. Please use one that references use of OBM.

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

Signed: _____ Print Name: Callie Fiddes
Title: Regulatory Specialist Email: regulatorypermitting@gwogco.com Date: 3/20/2015

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

COGCC Approved: HICKEY, MIKE Date: 4/29/2015

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

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

Engineer	Returned to draft at operators request for additional casing/cementing revision.	4/20/2015 11:13:53 AM
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Total: 1 comment(s)

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

400804848	FORM 4 SUBMITTED
400809756	DIRECTIONAL DATA
400809757	DEVIATED DRILLING PLAN
400812616	PROPOSED SPACING UNIT
400812617	WELL LOCATION PLAT
400821418	WASTE MANAGEMENT PLAN
400828320	WASTE MANAGEMENT PLAN

Total Attach: 7 Files