

**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
Document Number: <b>400933967</b>			
Date Received: <b>11/10/2015</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: 10396 Contact Name Cheryl Rowell  
 Name of Operator: SWN PRODUCTION COMPANY LLC Phone: (832) 796-7439  
 Address: PO BOX 12359 Fax: (832) 796-8817  
 City: SPRING State: TX Zip: 77391 Email: cheryl\_rowell@swn.com

Complete the Attachment  
Checklist

OP OGCC

API Number : 05- 081 00 OGCC Facility ID Number: 313399  
 Well/Facility Name: Gamma State Well/Facility Number: 14-15  
 Location QtrQtr: Lot 4 Section: 15 Township: 7N Range: 93W Meridian: 6  
 County: MOFFAT Field Name: WILDCAT  
 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 Lot 4 Sec 15

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>606</u>	<u>FSL</u>	<u>659</u>	<u>FWL</u>
_____	_____	_____	_____
Twp <u>7N</u>	Range <u>93W</u>	Meridian <u>6</u>	
Twp _____	Range _____	Meridian _____	
_____	_____	_____	_____
_____	_____	_____	_____
Twp _____	Range _____		
Twp _____	Range _____		
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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\*\* attach deviated drilling plan

**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 GAMMA STATE Number 14-15 Effective Date: \_\_\_\_\_

To: Name \_\_\_\_\_ Number \_\_\_\_\_

**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: Soil Testing & Pit Closure

**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 11/10/2015

REPORT OF WORK DONE Date Work Completed \_\_\_\_\_

- Intent to Recomplete (Form 2 also required)
- Change Drilling Plan
- Gross Interval Change
- Other Soil Treatment
- Request to Vent or Flare
- Repair Well
- Rule 502 variance requested. Must provide detailed info regarding request.
- Status Update/Change of Remediation Plans for Spills and Releases
- E&P Waste Mangement Plan
- Beneficial Reuse of E&P Waste

**COMMENTS:**

SWN Production Company, LLC is working to close the Gamma State 14-15D pit. After two rounds of investigations to assess the vertical and horizontal extent of impacted soils, SWN has worked with LT Environmental (LTE) to develop this work plan. LTE will be providing third party oversight of all activities described in this plan. Attached is the proposed plan for onsite treatment of impacted soils, for the reclamation of the area of the former Gamma State 14-15D mud pit, to levels below the COGCC Table 910-1 concentration for TPH.

**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:

[Empty comment box]

**Best Management Practices**

**No BMP/COA Type**

**Description**

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Operator Comments:

Form 27 attached with work discription, timeline and drawing of area to be treated.

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@swm.com Date: 11/10/2015

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

COGCC Approved: KOEPSELL, ARTHUR Date: 11/10/2015

**CONDITIONS OF APPROVAL, IF ANY:**

**COA Type**

**Description**

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**General Comments**

<b>User Group</b>	<b>Comment</b>	<b>Comment Date</b>
Agency	-Work plan is approved; however additional information and remediation may be required during the course of investigation and remediation. -COGCC should be notified immediately, in the event that groundwater is encountered in investigation. -Operator should provide notice to Environmental staff Kris Neidel (kris.neidel@state.co.us) or 970-871-1963 for sampling schedule. -Extent of excavations should be confirmed with soil samples to demonstrate concentrations below table 910-1. This may be samples that were taken with soils rig or by hand at time of excavation.	11/10/2015 5:02:45 PM

Total: 1 comment(s)

**Attachment Check List**

<b>Att Doc Num</b>	<b>Name</b>
400933967	FORM 4 SUBMITTED
400934029	OTHER

Total Attach: 2 Files