

# State of Colorado Oil and Gas Conservation Commission

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Phone: (303) 894-2100 Fax: (303) 894-2109



DE	ET	OE	ES
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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: <u>100185</u>	Contact Name: <u>Nathan Fons</u>
Name of Operator: <u>ENCANA OIL &amp; GAS (USA) INC</u>	Phone: <u>(303) 5137504</u>
Address: <u>370 17TH ST STE 1700</u>	Fax: <u>( )</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202-5632</u>	Email: <u>nathan.fons@encana.com</u>

Complete the Attachment  
Checklist

OP OGCC

API Number : 05- <u>123 34619 00</u>	OGCC Facility ID Number: <u>426238</u>
Well/Facility Name: <u>PEPPLER FARMS</u>	Well/Facility Number: <u>41-4</u>
Location QtrQtr: <u>NWNE</u> Section: <u>4</u> Township: <u>3N</u> Range: <u>68W</u> Meridian: <u>6</u>	
County: <u>WELD</u> Field Name: <u>WATTENBERG</u>	
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 \_\_\_\_\_ 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:

FNL/FSL		FEL/FWL	
229	FNL	2226	FEL

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

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Current **Surface Location From** QtrQtr NWNE Sec 4

Twp 3N Range 68W Meridian 6

New **Surface Location To** QtrQtr  Sec

Twp  Range  Meridian

Change of **Top of Productive Zone Footage From** Exterior Section Lines:

660	FNL	660	FEL
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Change of **Top of Productive Zone Footage To** Exterior Section Lines:

				**
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Current **Top of Productive Zone Location From** Sec 4

Twp 3N Range 68W

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

Twp  Range

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

660	FNL	660	FEL
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Change of **Bottomhole Footage To** Exterior Section Lines:

				**
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Current **Bottomhole Location** Sec 4 Twp 3N Range 68W

\*\* attach deviated drilling plan

New **Bottomhole Location** Sec  Twp  Range

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 \_\_\_\_\_



Comments:

ALL DISTURBED AREAS AFFECTED BY DRILLING OPERATIONS HAVE BEEN REGRADED AS NEARLY AS PRACTIBLE TO THEIR ORIGINAL CONDITIONS. THE SITE HAS BEEN REVIEWED TO DETERMINE WHAT PROCEDURES WILL OFFER THE BEST CHANCE AT REACHING REGROWTH GOALS, EXCEPT REASONABLY NEEDED AREAS FOR PRODUCTION. FACTORS THAT WERE CONSIDERED ARE PRE-EXISTING CONDITIONS, SOIL TYPE, SOIL COMPACTION, LAND OWNER PREFERENCE AND TIME OF YEAR. THE ROCKY MTN NATIVE MIX WAS APPLIED USING A GRASS DRILL EQUIPPED TO SEED ALL TYPES OF GRASSES. ONCE APPLIED, A LAYER OF CERTIFIED WEED FREE STRAW WAS APPLIED TO THE SITE AT A RATE OF 3 TO 4 TONS PER ACRE AS NEEDED TO PROVIDE ADEQUATE COVERAGE. THE STRAW WAS THEN CRIMPED INTO THE SOIL TO GIVE THE SEED BED PROTECTION FROM WIND AND WATER EROSION.

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:

[Empty comment box]

CASING AND CEMENTING CHANGES

Table with columns: 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:

[Empty description box]

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.):

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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:

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<b>Best Management Practices</b>	
<b>No BMP/COA Type</b>	<b>Description</b>

Operator Comments:

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

Signed: \_\_\_\_\_ Print Name: Nathan Fons  
Title: Env. Specialist Email: nathan.fons@encana.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: \_\_\_\_\_

<b>CONDITIONS OF APPROVAL, IF ANY:</b>	
<b>COA Type</b>	<b>Description</b>

<b>General Comments</b>		
<b>User Group</b>	<b>Comment</b>	<b>Comment Date</b>

Total: 0 comment(s)

<b>Attachment Check List</b>	
<b>Att Doc Num</b>	<b>Name</b>
400941752	LOCATION PICTURES

Total Attach: 1 Files