

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
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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: 10459 Contact Name Kaleb Roush
 Name of Operator: EXTRACTION OIL & GAS LLC Phone: (720) 557-8322
 Address: 370 17TH STREET SUITE 5300 Fax: ()
 City: DENVER State: CO Zip: 80202 Email: kroush@extractionog.com

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 123 40424 00 OGCC Facility ID Number: 439439
 Well/Facility Name: Breniman Well/Facility Number: 2
 Location QtrQtr: NENW Section: 16 Township: 6N Range: 67W Meridian: 6
 County: WELD Field Name: WATTENBERG
 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 NENW Sec 16

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 16

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 18 Twp 6N

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>483</u>	<u>FNL</u>	<u>2127</u>	<u>FWL</u>
_____	_____	_____	_____
Twp <u>6N</u>	Range <u>67W</u>	Meridian <u>6</u>	
Twp _____	Range _____	Meridian _____	
<u>441</u>	<u>FNL</u>	<u>310</u>	<u>FWL</u>
_____	_____	_____	_____
Twp <u>6N</u>	Range <u>67W</u>		
Twp _____	Range _____		
<u>198</u>	<u>FNL</u>	<u>460</u>	<u>FWL</u>
_____	_____	_____	_____
Twp _____	Range _____		
Twp _____	Range _____		

**

**

** attach deviated drilling plan

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 05/01/2016

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:

Please see comments below.

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	100	80	0
Surface String	13	1		2	9	5		8	36	0	1500	400	1500	0
First String	7	7		8	5	1		2	20	0	17395	1600	17395	1500

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:

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

Operator Comments:

This sundry is being submitted to change the cementing/ casing design of this well to a monobore. An oil-based system will additionally be used for the 7 7/8" hole. A sundry for the Breniman location (ID# 439436) has been submitted for the WMP to reflect this shift from a purely water based system. An offsite commercial disposal plan is already in place.

Our cementing/ casing plan does provide coverage for the Upper Pierre Aquifer as the long string of this well will be cased to surface and cemented up into the surface casing.

The PWP of this well is the same as the originally permitted well.

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

Signed: _____ Print Name: Kaleb Roush
Title: Engineering Technician Email: kroush@extractionog.com Date: 12/30/2015

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: 1/7/2016

CONDITIONS OF APPROVAL, IF ANY:

COA Type

Description

	This Sundry Notice Form 4 authorizes changes the drilling/casing/cementing program as shown on the Drilling Permit Form 2 and must be visibly posted with the permit during drilling.
	1) Submit Form 42 (Spud Notice) electronically to COGCC 48 hours prior to MIRU for the first well activity with a rig on the pad. 2) Submit Form 42 (Spud Notice) electronically to COGCC 48 hours prior to spud for each subsequent well drilled on the pad. 3) Comply with Rule 317.j and provide cement coverage from TD to a minimum of 200' above the Niobrara. Verify coverage with cement bond log. 4) Surface casing interval shall be drilled with water-based fluids.

General Comments

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

Total: 0 comment(s)

Attachment Check List

Att Doc Num

Name

400961626	FORM 4 SUBMITTED
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Total Attach: 1 Files