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Document Number: 400870635			
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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 Alyssa Andrews

Name of Operator: EXTRACTION OIL & GAS LLC

Phone: (720) 420-5749

Address: 370 17TH STREET SUITE 5300

Fax: ()

City: DENVER

State: CO

Zip: 80202

Email: alyssa.andrews@iptenergyservices.com

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 123 38817 00

OGCC Facility ID Number: 435877

Well/Facility Name: CS-Kinkade

Well/Facility Number: 4-1-12

Location QtrQtr: SWSE

Section: 36

Township: 6N

Range: 66W

Meridian: 6

County: WELD

Field Name: WATTENBERG

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 40.438370

PDOP Reading 1.0

Date of Measurement 03/05/2012

Longitude -104.722600

GPS Instrument Operator's Name B. TESSELY

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 SWSE

Sec 36

New Surface Location To

QtrQtr SWSE

Sec 36

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 36

New Top of Productive Zone Location To

Sec 1

Change of Bottomhole Footage From Exterior Section Lines:

Change of Bottomhole Footage To Exterior Section Lines:

Current Bottomhole Location

Sec 12

Twp 5N

New Bottomhole Location

Sec 13

Twp 5N

Is location in High Density Area?

Distance, in feet, to nearest building 330 , public road: 327 , above ground utility: 313 , railroad: 235 ,
property line: 185 , lease line: 0 , well in same formation: 333

Ground Elevation 4664 feet Surface owner consultation date

FNL/FSL		FEL/FWL	
338	FSL	1872	FEL
338	FSL	1872	FEL
Twp 6N	Range 66W	Meridian 6	
Twp 6N	Range 66W	Meridian 6	
864	FSL	977	FEL
460	FNL	998	FEL
			**
Twp 6N	Range 66W		
Twp 5N	Range 66W		
2525	FNL	1010	FEL
2201	FNL	1036	FEL
			**

** attach deviated drilling plan

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		800	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 CS-KINKADE Number 4-1-12 Effective Date: 07/17/2015

To: Name CS-KINKADE Number 4-1-13

☐ **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 12/31/2015

☐ 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:

1. The laterals are being extended into Section 13-5N-66W
2. Casing program is changing to Monobore
3. Name of well is changing

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	100	80	100	0
Surface String	12	1		4	9	5		8	36	0	1500	400	1500	0
First String	7	7		8	5	1		2	20	0	20387	1948	20387	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:

Best Management Practices

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

Operator Comments:

1. The laterals are being extended into Section 13-5N-66W
2. Casing program is changing to Monobore
3. Name of well is changing

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

Signed: _____ Print Name: Alyssa Andrews

Title: Operations Engineer Email: alyssa.andrews@iptenergyservices.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: _____

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

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

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Total: 0 comment(s)

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

400870661	DIRECTIONAL DATA
400870662	DEVIATED DRILLING PLAN
400870663	WELL LOCATION PLAT
400962784	PROPOSED SPACING UNIT

Total Attach: 4 Files