

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



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|--------------------------------------|----|----|----|
| DE | ET | OE | ES |
| Document Number: 401074345 | | | |
| Date Received: 07/07/2016 | | | |

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>68710</u> | Contact Name <u>Andy Peterson</u> |
| Name of Operator: <u>PETERSON ENERGY OPERATING INC</u> | Phone: <u>(970) 669-7411</u> |
| Address: <u>2154 W EISENHOWER BLVD</u> | Fax: <u>(970) 669-4077</u> |
| City: <u>LOVELAND</u> State: <u>CO</u> Zip: <u>80537</u> | Email: <u>andy@petersonenergyoperating.com</u> |

Complete the Attachment
Checklist

OP OGCC

| | |
|--|--|
| API Number : 05- <u>123</u> <u>07892</u> <u>00</u> | OGCC Facility ID Number: <u>240104</u> |
| Well/Facility Name: <u>THOMASON</u> | Well/Facility Number: <u>1</u> |
| Location QtrQtr: <u>SESW</u> Section: <u>16</u> Township: <u>2N</u> Range: <u>65W</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:

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

Current **Surface** Location **From** QtrQtr SESW 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 _____

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>990</u> | <u>FSL</u> | <u>1600</u> | <u>FWL</u> |
| _____ | _____ | _____ | _____ |
| Twp <u>2N</u> | Range <u>65W</u> | Meridian <u>6</u> | |
| Twp _____ | Range _____ | Meridian _____ | |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| Twp _____ | Range _____ | | |
| Twp _____ | Range _____ | | |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

**

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** 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> |
|----------------------------|-----------------------|-----------------------------|---------------------|---------------------------|
| | | | | |

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 THOMASON Number 1 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: _____

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 07/18/2016

☐ 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 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 checked="" type="checkbox"/> Other <u>Remediation Plan</u> | <input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases | |

COMMENTS:

Due to nearby drilling and fracing operations, Peterson Energy is required to remediate/squeeze cement the Thomason 1 oil well. Please see attached remediation procedure.

Remediation Plan

1. Set RBP at 7614' (50' above J-sand).
2. Remove 2M wellhead, replace with 5M flanged head.
3. Pressure test casing to 1000 psi to verify casing integrity.
4. Run CBL to determine 1st and 2nd stage cement tops.
5. Verify DV tool placement @ 817' and adequate cement coverage across Fox Hills. Squeeze or cement via annulus as necessary to provide adequate cement coverage across Fox Hills.
6. Verify 1st stage cement top above 6730' (>200' over Niobrara). If less than 200' coverage, squeeze to obtain adequate bond over Niobrara.
7. Recover RBP above J-sand.
8. Hydrotest tubing with retrievable packer & set packer below TOC. Install new 5K tubing master valve.
9. After fracs, release packer, POOH.
10. Run production tubing, land at J-sand, swab well in.

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 |
|-------------|------|----|---|------|------|----|---|--------|-------|------------|---------------|-----------------|---------------|------------|
| | | | | | | | | | | | | | | |

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:

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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: Ryan Dornbos
Title: Petroleum Engineer Email: ryan@petersonenergyoperating.com Date: 7/7/2016

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

COGCC Approved: McCoy, Diane Date: 7/20/2016

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

| | |
|--|---|
| | 1) Verify cement from surface casing to 770' or deeper with a CBL; if cement coverage does not meet requirements add additional cement to provide aquifer isolation 2) Add cement 200' above and 200' below the Sussex (minimum of 4310-4810'). 3) Add cement to have 200' above the Niobrara (TOC of 6732' or shallower). 4) All placed cement shall be verified with a CBL and documented with a Form 5. |
|--|---|

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

| | | |
|--|--|--|
| | | |
|--|--|--|

Total: 0 comment(s)

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

| | |
|-----------|--------------------|
| 401074345 | FORM 4 SUBMITTED |
| 401075184 | WELLBORE DIAGRAM |
| 401075215 | WELLBORE DIAGRAM |
| 401075216 | OPERATIONS SUMMARY |

Total Attach: 4 Files