

**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:<br><b>401133315</b> |    |    |    |
| Date Received:<br><b>10/19/2016</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: 96850 Contact Name Vicki Schoeber  
 Name of Operator: TEP ROCKY MOUNTAIN LLC Phone: (970) 263-2721  
 Address: PO BOX 370 Fax: ( )  
 City: PARACHUTE State: CO Zip: 81635 Email: vschoeber@terraep.com

Complete the Attachment  
Checklist

OP OGCC

API Number : 05- 045 12775 00 OGCC Facility ID Number: 286779  
 Well/Facility Name: DIAMOND ELD Well/Facility Number: RWF 414-4  
 Location QtrQtr: NWSW Section: 4 Township: 7S Range: 94W Meridian: 6  
 County: GARFIELD Field Name: RULISON  
 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 NWSW Sec 4

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 4

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 4 Twp 7S

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>1527</u>   | <u>FSL</u>       | <u>369</u>        | <u>FWL</u> |
| _____         | _____            | _____             | _____      |
| Twp <u>7S</u> | Range <u>94W</u> | Meridian <u>6</u> |            |
| Twp _____     | Range _____      | Meridian _____    |            |
| <u>241</u>    | <u>FSL</u>       | <u>440</u>        | <u>FWL</u> |
| _____         | _____            | _____             | _____      |
| Twp <u>7S</u> | Range <u>94W</u> |                   |            |
| Twp _____     | Range _____      |                   |            |
| <u>241</u>    | <u>FSL</u>       | <u>440</u>        | <u>FWL</u> |
| _____         | _____            | _____             | _____      |
| Twp <u>7S</u> | Range <u>94W</u> |                   |            |
| Twp _____     | Range _____      |                   |            |

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\*\* 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    10/26/2016

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 checked="" 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:**

TEP Rocky Mountain LLC respectfully requests approval to repair suspected casing leaks in the RWF 414-4 well. Procedure and wellbore diagram are attached.

**Proposed Procedure:**

1. MIRUSU, pump and tanks
2. ND Tree and NU BOPE
- Prep to Cement
3. PU Tubing and TIH with Packer and 5 jts of tailpipe
4. Dump 5 sx sand on top of RBP.
5. Set packer above RBP. Pressure test RBP to 1000 psi.
6. With packer, pressure test casing to further isolate interval that leaks. (Current area identified is 1942' – 2402').
7. With leak area identified, record stabilize pressure required to establish injection rate of 1 bpm.
8. TIH so the bottom of tailpipe is set at deepest leak.
- Cementing – Bullhead into Surface/Production Casing annulus
9. Mix 225 sx cement. Spot cement to end of tailpipe. (Tubing Volume = 9.3 bbls, 22 sx, need 7.1 bbls, 17 sx placed in casing)
10. TOH with tubing so that the packer is at 1350' (EOT will be +/-1500', 440' above the topmost leak). Set packer.
11. Make sure the Bradenhead valve is CLOSED.
12. Pump 15 sx (6 bbls) cement into holes or until max pressure of 600 psi is reached – whichever comes first.
- Cementing – Circulation/Hesitation
13. OPEN Bradenhead Valve to allow circulation.
14. Pump cement into holes at rate of 2+ bpm (pressure not to exceed 600 psi)
15. Pump a total of 225 sx. Displace with produced water to EOT.
16. CLOSE Bradenhead Valve
17. Pressure up on tubing to pressure recorded in step 7 + 200 psi.
18. Shut down pumping for 15 minutes. (If pressure drops below stabilized pressure recorded in step 7 during the shut in phase, then bump pressure by 100 psi).
19. At end of 15 minutes shut in, step up pressure by 150 psi.
20. Repeat steps until surface pressure reaches 600 psi
21. Do not pump more than 5 bbls total during hesitation squeezes.
22. Hold and monitor pressure for 2 hours.
23. At end of 2 hours, slowly bleed off pressure and watch for returns.
24. Release packer and TOH.
- Land Production String
25. TIH with bit for 4-1/2" 11.6 ppf casing.
26. Drill up cement, noting top and bottom depths.
27. Pressure test casing to 500 psi.
28. If pressure test fails to hold, then evaluate for re-squeeze.
29. TOH with bit.
30. RU Wireline Unit and run CBL from 3000' to TOC. RD Wireline Unit.
31. TIH with RBP retrieving head.
32. Circulate sand off RBP, latch on and TOH
33. TIH with production string (NC, SN and tubing).
34. Land EOT between 8120"- 8150'.
35. ND BOPE and NU Tree
- Cement blend:
- Weight: 12.3 lb/gal
- Yield: 2.33 ft3/sx
- Water Required: 13.55 gal/sx (72 bbls total for cement + displacement volume)
- Sacks Required: 225

**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**

**No BMP/COA Type**

**Description**

**Operator Comments:**

TEP Rocky Mountain LLC respectfully requests approval to repair suspected casing leaks in the RWF 414-4 well. Procedure and wellbore diagram are attached.

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

Signed: \_\_\_\_\_ Print Name: Vicki Schoeber  
Title: Regulatory Specialist Email: vschoeber@terraep.com Date: 10/19/2016

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

COGCC Approved: BURGER, CRAIG Date: 10/21/2016

**CONDITIONS OF APPROVAL, IF ANY:**

**COA Type**

**Description**

| <u>COA Type</u> | <u>Description</u> |
|-----------------|--------------------|
|                 |                    |

**General Comments**

**User Group**

**Comment**

**Comment Date**

|          |   |                           |
|----------|---|---------------------------|
| Engineer | Operator to sent revised procedure. Added as attachment and pasted into comments. | 10/21/2016<br>10:56:41 AM |
|----------|---|---------------------------|

Total: 1 comment(s)

**Attachment Check List**

**Att Doc Num**

**Name**

|           |                  |
|-----------|------------------|
| 401133315 | FORM 4 SUBMITTED |
| 401133327 | WELLBORE DIAGRAM |
| 401135355 | OTHER            |

Total Attach: 3 Files