

**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: <b>401142679</b>			
Date Received: <b>11/03/2016</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: 10459 Contact Name Alyssa Andrews  
 Name of Operator: EXTRACTION OIL & GAS LLC Phone: (720) 481-2379  
 Address: 370 17TH STREET SUITE 5300 Fax: ( )  
 City: DENVER State: CO Zip: 80202 Email: aandrews@extractionog.com

Complete the Attachment  
Checklist  
  
OP OGCC

API Number : 05- 123 40699 00 OGCC Facility ID Number: 440139  
 Well/Facility Name: Matrix Well/Facility Number: H-29HN  
 Location QtrQtr: SESW Section: 29 Township: 6N Range: 65W Meridian: 6  
 County: WELD Field Name: GREELEY  
 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:

FNL/FSL		FEL/FWL	
589	FSL	2315	FWL

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

Current **Surface** Location **From** QtrQtr SESW Sec 29  
 New **Surface** Location **To** QtrQtr \_\_\_\_\_ Sec \_\_\_\_\_

Twp 6N Range 65W Meridian 6  
 Twp \_\_\_\_\_ Range \_\_\_\_\_ Meridian \_\_\_\_\_

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

465	FSL	2120	FWL

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

Current **Top of Productive Zone** Location **From** Sec 29  
 New **Top of Productive Zone** Location **To** Sec \_\_\_\_\_

Twp 6N Range 65W  
 Twp \_\_\_\_\_ Range \_\_\_\_\_

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

465	FNL	2120	FWL

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

Current **Bottomhole** Location Sec 29 Twp 6N  
 New **Bottomhole** Location Sec \_\_\_\_\_ Twp \_\_\_\_\_

Range 65W \*\* attach deviated drilling plan  
 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:

**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 11/03/2016

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:

The purpose of this sundry is to update the Casing/Cementing to Monobore. Additionally, an oil-based mud system will be used.

**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	12	1		4	9	5		8	36	0	1500	400	1500	0
First String	7	7		8	5	1		2	20	0	11602	1080	11602	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:

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

**Operator Comments:**

The purpose of this sundry is to update the Casing/Cementing to Monobore. Additionally, an oil-based mud system will be used.

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: Regulatory Analyst Email: aandrews@extractionog.com Date: 11/3/2016

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

COGCC Approved: HICKEY, MIKE Date: 11/9/2016

**CONDITIONS OF APPROVAL, IF ANY:**

**COA Type**

**Description**

	Bradenhead tests shall be performed and reported according to the following schedule and Form 17 submitted within 10 days of each test: 1) Within 60 days of rig release and prior to stimulation and 2) If a delayed completion, 6-7 months after rig release and prior to stimulation. 3) Within 30 days after first production, as reported on Form 5A.
	1) Submit Form 42 electronically to COGCC 48 hours prior to MIRU for the first well activity with a rig on the pad and provide 48 hour spud notice for each subsequent well drilled on the pad. 2) Oil-based drilling fluid is to be used only after all aquifers are covered. 3) 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.

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
		Stamp Upon Approval

Total: 0 comment(s)

**Attachment Check List**

<b><u>Att Doc Num</u></b>	<b><u>Name</u></b>
401142679	FORM 4 SUBMITTED

Total Attach: 1 Files