

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: 401138519			
Date Received: 11/07/2016			

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: 26580 Contact Name Larissa Farrell
 Name of Operator: BURLINGTON RESOURCES OIL & GAS LP Phone: (505) 326-9504
 Address: PO BOX 4289 Fax: (918) 662-6259
 City: FARMINGTON State: NM Zip: 87499 Email: Larissa.L.Farrell@ConocoPhillips.com

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 001 09742 00 OGCC Facility ID Number: 428355
 Well/Facility Name: Venturers Well/Facility Number: 41-4H
 Location QtrQtr: NENE Section: 19 Township: 3S Range: 64W Meridian: 6
 County: ADAMS Field Name: WILDCAT
 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 39.780533 PDOP Reading 1.8 Date of Measurement 11/04/2016
 Longitude -104.584467 GPS Instrument Operator's Name Dallas Neilson

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 NENE Sec 19

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 19

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 19 Twp 3S Range 64W

New **Bottomhole** Location Sec _____ Twp _____ 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 _____

FNL/FSL		FEL/FWL	
<u>933</u>	<u>FNL</u>	<u>300</u>	<u>FEL</u>
_____	_____	_____	_____
Twp <u>3S</u>	Range <u>64W</u>	Meridian <u>6</u>	
Twp _____	Range _____	Meridian _____	
<u>660</u>	<u>FNL</u>	<u>622</u>	<u>FEL</u>
_____	_____	_____	_____
Twp <u>3S</u>	Range <u>64W</u>		
Twp _____	Range _____		
<u>660</u>	<u>FNL</u>	<u>460</u>	<u>FWL</u>
_____	_____	_____	_____

** 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 _____

REPORT OF WORK DONE Date Work Completed 08/17/2013

<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>Preset Conductors</u>	<input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases	

COMMENTS:

ConocoPhillips used 168.3 cubic feet of cement to set conductor casing. 30" casing was set from 28' - 68' ftKB and 16" pipe was installed from 24' - 124' ftKB.

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

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

Operator Comments:

ConocoPhillips requests to keep this conductor for future use. ConocoPhillips plans to drill this well in the future.

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

Signed: _____ Print Name: Larissa Farrell
Title: Regulatory Technician Email: Larissa.L.Farrell@ConocoPhillips.com Date: 11/7/2016

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

COGCC Approved: Trask, Sabrina Date: 1/23/2017

CONDITIONS OF APPROVAL, IF ANY:

COA Type

Description

<u>COA Type</u>	<u>Description</u>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	As-built GPS data has been corrected and comment has been added by Operator for future use of this well.	11/21/2016
Permit	Returned to draft: - missing as-built GPS data (SHL location and date of measurement) - missing certification statement of future intent for this well	11/01/2016

Total: 2 comment(s)

Attachment Check List

Att Doc Num

Name

401138519	FORM 4 SUBMITTED
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Total Attach: 1 Files