

**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>401272699</b> |    |    |    |
| Date Received:                       |    |    |    |

**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: 10261 Contact Name Meagan Miller  
 Name of Operator: BAYSWATER EXPLORATION AND PRODUCTION LLC Phone: (303) 8932503  
 Address: 730 17TH ST STE 610 Fax: (303) 8932508  
 City: DENVER State: CO Zip: 80202 Email: mmiller@bayswater.us

Complete the Attachment  
Checklist

OP OGCC

API Number : 05- 005 06964 00 OGCC Facility ID Number: 204879  
 Well/Facility Name: UPRC Well/Facility Number: 21X-21  
 Location QtrQtr: NENW Section: 21 Township: 4S Range: 64W Meridian: 6  
 County: ARAPAHOE Field Name: CHALICE  
 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:

|         |          |
|---------|----------|
| FNL/FSL | FEL/FWL  |
| 850 FNL | 1980 FWL |
|         |          |

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

Current **Surface Location From** QtrQtr NENW Sec 21 Twp 4S Range 64W Meridian 6  
 New **Surface Location To** QtrQtr \_\_\_\_\_ Sec \_\_\_\_\_ Twp \_\_\_\_\_ Range \_\_\_\_\_ Meridian \_\_\_\_\_

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

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

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

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

Current **Top of Productive Zone Location From** Sec \_\_\_\_\_ Twp \_\_\_\_\_ Range \_\_\_\_\_

New **Top of Productive Zone Location To** Sec \_\_\_\_\_ Twp \_\_\_\_\_ Range \_\_\_\_\_

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

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

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

Current **Bottomhole Location** Sec \_\_\_\_\_ Twp \_\_\_\_\_ Range \_\_\_\_\_

New **Bottomhole Location** Sec \_\_\_\_\_ Twp \_\_\_\_\_ Range \_\_\_\_\_

\*\* attach deviated drilling plan

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:

Interim Reclamation procedures and associated mitigation measures include stabilization of work areas, revegetation of non-working surface or returning non-working areas back to cropland, physical and/or chemical weed mitigation measures when necessary, and maintenance activities are conducted as necessary. During of the most recent Post-Construction stormwater inspection, conducted on 1/04/2017, it was determined the location met Rule 1003.e. requirements and is ready for inspection by the COGCC. Bayswater requests the Interim Reclamation inspection occur during the first favorable growing season.

**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 \_\_\_\_\_

- Intent to Recomplete (Form 2 also required)
- Change Drilling Plan
- Gross Interval Change
- Other \_\_\_\_\_
- Request to Vent or Flare
- Repair Well
- Rule 502 variance requested. Must provide detailed info regarding request.
- Status Update/Change of Remediation Plans for Spills and Releases
- E&P Waste Mangement Plan
- Beneficial Reuse of E&P Waste

COMMENTS:

**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:

|  |
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|  |
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### Best Management Practices

No BMP/COA Type

Description

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

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: Tara Galanski

Title: Staff Professional Email: jford@kleinfelder.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

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

### General Comments

User Group

Comment

Comment Date

|  |  |                     |
|--|--|---------------------|
|  |  | Stamp Upon Approval |
|--|--|---------------------|

Total: 0 comment(s)

### Attachment Check List

Att Doc Num

Name

|           |                   |
|-----------|-------------------|
| 401272704 | LOCATION PICTURES |
|-----------|-------------------|

Total Attach: 1 Files