

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: <u>401506392</u>			
Date Received: <u>01/08/2018</u>			

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		Complete the Attachment Checklist	OP	OGCC					
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					
API Number : 05-04500					OGCC Facility ID Number:		452566	Survey Plat				
Well/Facility Name: FEDERAL					Well/Facility Number:		RU 23-17	Directional Survey				
Location	QtrQtr: NESW	Section:	17	Township:	7S	Range:	93W	Meridian:	6	Srfc Eqpmt Diagram		
County: GARFIELD		Field Name:						Technical Info Page				
Federal, Indian or State Lease Number:								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 **NESW** Sec **17**

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	
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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	
<div>1819</div>	<div>FSL</div>	<div>2495</div>	<div>FWL</div>
<div></div>	<div></div>	<div></div>	<div></div>
Twp <div>7S</div>	Range <div>93W</div>	Meridian <div>6</div>	
Twp <div></div>	Range <div></div>	Meridian <div></div>	
<div></div>	<div></div>	<div></div>	<div>**</div>
<div></div>	<div></div>	<div></div>	
Twp <div></div>	Range <div></div>		
Twp <div></div>	Range <div></div>		
<div></div>	<div></div>	<div></div>	<div>**</div>
<div></div>	<div></div>	<div></div>	
Range <div></div>	<div>** attach deviated drilling plan</div>		
Range <div></div>			

** attach deviated drilling plan

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 FEDERAL Number RU 23-17 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 _____

☒ REPORT OF WORK DONE Date Work Completed 11/14/2017

- | | | |
|--|---|--|
| <input type="checkbox"/> Intent to Recomplete (Form 2 also required) | <input type="checkbox"/> Request to Vent or Flare | <input type="checkbox"/> E&P Waste Management 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:

This Form 4 is to report preset conductors on the Federal RU 23-17 pad per the Notice to Operators: Procedures for Preset Conductors (Rev. October 6, 2016). All the conductors at this pad location were set by 11/14/17, per the attached well list. Due to issues encountered while setting these conductors, eleven wells were set short of the permitted depth.

TEP Rocky Mountain LLC requests to keep these conductors open for future use pursuant to the Notice to Operators: Procedures for Preset Conductors. TEP will comply with the safety standards, and refile/maintain valid Form 2A and Form 2s for these locations.

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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Best Management Practices**No BMP/COA Type****Description**

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Operator Comments:

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TEP Rocky Mountain LLC requests to keep these conductors open for future use pursuant to the Notice to Operators: Procedures for Preset Conductors. TEP will comply with the safety standards, and refile/maintain valid Form 2A and Form 2s for these locations.

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: 1/8/2018

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

COGCC Approved: FREEMAN, SARAH Date: 1/9/2018

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

	If the well is not drilled prior to the expiration of the original APD, the operator shall meet the requirements of the Conductor Notice to Operators dated 10/6/2016 within 60 days of the expiration: (a) plug conductor and reclaim site, (b) request to keep conductor and provide additional financial assurance, or (c) submit an alternative plan as a variance request.
	Reporting New Conductors Preset after 9-1-2016 per Conductor NTO dated Oct. 6, 2016

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

Routing Review	A task has been opened for the Permit Group to review the information provided by the operator.	01/08/2018
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Total: 1 comment(s)

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

401506392	SUNDRY NOTICE APPROVED-OTHER
401506426	OTHER
401507917	FORM 4 SUBMITTED

Total Attach: 3 Files