

# State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109



FOR OGCC USE ONLY

Document Number:

402045353

Date Received:

## UNDERGROUND INJECTION FORMATION PERMIT APPLICATION

Per Rule 325, this form shall be submitted with all required attachments.

A Form 31 – Intent shall be submitted and approved prior to completing an injection zone.

A Form 31 – Subsequent shall be submitted following collection of water samples and injectivity test (if performed) and must be approved prior to injection in any new injection facility.

NOTE: Per Rule 324B, an aquifer exemption is required for any injection formation with water quality less than 10,000 mg/L total dissolved solids (TDS). Contact the Commission for further requirements if the TDS as determined by water analysis for the injection zone is less than 10,000 mg/L.

Form 31 Type

☒ Intent☐ Subsequent

UIC Facility ID

0

UIC Facility ID Required for Subsequent  
Form 31

### UIC FACILITY INFORMATION

Facility Name and Number: Pintail

16

County: JACKSON

Facility Location: NESW / 16 / 7N / 80W / 6

Field Name and Number:

WILDCAT

99999

Facility Type: ☐ Enhanced Recovery☒ Disposal☐ Simultaneous Disposal

Single or Multiple Well Facility?

☐ Single☒ Multiple

Proposed Injection Program (Required):

SandRidge intends to change the objective disposal formation from the Entrada to the Dakota-Lakota formation of the existing directional disposal Pintail SWD 0780 2-16D well.

### OPERATOR INFORMATION

OGCC Operator Number: 10598

Name of Operator: SANDRIDGE EXPLORATION &amp; PRODUCTION LLC

Address: 123 ROBERT S KERR AVE

City: OKLAHOMA CITY

State: OK

Zip: 73102

Contact Name and Telephone:

Name: Diane Overbey

Phone: (405) 429 5828

Fax: ( )

Email: doverbey@sandridgeenergy.com

### INJECTED FLUID TYPE

All injected fluids must be Exempt E&P waste per RCRA Subpart C.

(Check all that apply.)

☒ Produced Water☐ Natural Gas☐ CO2☐ Drilling Fluids☐ Exempt Gas Plant Waste☒ Used Workover Fluids☒ Flowback Fluids☐ Other Fluids (describe):

Commercial Disposal Facility

☐ Yes☒ No

Commercial UIC Bond Surety ID:

Commercial Facility Description: Describe the physical region of the facility, the details of the operations, and the type of fluids to be injected.

**PROPOSED INJECTION FORMATIONS**

FORMATION (Name): DAKOTA-LAKOTA Porosity: 13 %  
Formation TDS: 3900 mg/L Frac Gradient: 0.69 psi/ft Permeability: 4 mD  
Proposed Stimulation Program: ☒ Acid ☐ Frac Treatment ☐ None

**ANTICIPATED FACILITY OPERATIONS CONDITIONS**

Under normal operating conditions, estimated TOTAL fluid injection rates and pressures for this facility:

FOR WATER: Daily Injection Rate Range From 100 to 8500 bbls/day  
Surface Injection Pressure Range From 1500 to 1750 psi  
FOR GAS: Daily Injection Rate Range From \_\_\_\_\_ to \_\_\_\_\_ mcf/day  
Surface Injection Pressure Range From \_\_\_\_\_ to \_\_\_\_\_ psi

Estimated Initial Injection Date: 10/1/2019

**AREA OF REVIEW OIL and GAS WELL EVALUATION SUMMARY**

Review all existing wells within 1/2 mile for injection formation isolation.

Area Review Date: 5/16/2019

Total number of Oil & Gas Wells within Area of Review:

ABANDONED WELLS (All wells that have been plugged: PA and DA status))

Total within Area of Review	0
Number To Be Re-Plugged	0

ACTIVE WELLS (All wells that have not been plugged: AC, DG, DM, IJ, PR, SU, SI, TA, WO, XX, UN status)

Total within Area of Review	0
Number Requiring Casing Repair	0
Number To Be Plugged	0

Operator's Area of Review Contact Email: doverbey@sandridgeenergy.com

☒ No Wells within 2,640'

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

Print Name: Justin Garrett Signed: \_\_\_\_\_

Title: Regulatory Analyst Date: \_\_\_\_\_

COGCC Approved: \_\_\_\_\_ Date: \_\_\_\_\_

Form 31 - Intent Expiration Date: \_\_\_\_\_

Per Rule 325.o, a 90 day extension of the Expiration Date may be requested via a Sundry Notice, Form 4 submitted prior to Form 31- Intent expiration

Order Number: \_\_\_\_\_ UIC FACILITY ID: 0

CONDITIONS OF APPROVAL, IF ANY:

COA Type	Description

### **Attachment Check List**

Att Doc Num	Name
402058322	AQUIFER EXEMPTION-COGCC
402058324	OIL & GAS WELL PLAT
402058330	STEP RATE/INJECTIVITY TEST DOCUMENTATION
402058334	WELLBORE DIAGRAM-CURRENT
402058336	SURFACE USE AGREEMENT FOR SALT WATER DISPOSAL
402058346	LIST OF MINERAL OWNERS ¼-MILE
402058347	MAP OF MINERAL OWNERS ¼-MILE
402058351	MAP OF O&G WELLS IN AREA OF REVIEW
402058352	LIST OF SURFACE OWNERS ¼-MILE
402058353	MAP OF SURFACE OWNERS ¼-MILE
402058356	MAP OF WATER WELLS ¼-MILE
402058359	UNIT AREA PLAT
402058360	CERTIFIED MAIL RECEIPT(S)
402062339	SURFACE FACILITY DIAGRAM

Total Attach: 14 Files

### **General Comments**

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)