

**State of Colorado**  
**Oil and Gas Conservation Commission**

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



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**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 Mike Gardner  
 Name of Operator: TEP ROCKY MOUNTAIN LLC Phone: (970) 263-2760  
 Address: PO BOX 370 Fax: ( )  
 City: PARACHUTE State: CO Zip: 81635 Email: mgardner@terraep.com

Complete the Attachment  
Checklist  
  
OP OGCC

API Number : 05- 045 23889 00 OGCC Facility ID Number: 454385  
 Well/Facility Name: FEDERAL Well/Facility Number: PA 14-24  
 Location QtrQtr: SWSE Section: 24 Township: 6S Range: 95W Meridian: 6  
 County: GARFIELD Field Name: PARACHUTE  
 Federal, Indian or State Lease Number: COC073094

Survey Plat		
Directional Survey		
Srvc Eqpmt Diagram		
Technical Info Page		
Other		

**GROUND WATER SAMPLING**

Uses of Ground Water Sampling Section

Request an Exception to Ground Water Sampling Requirements in Greater Wattenberg Area Rule 318A.e(4) or in Statewide Rule 609.c. Request a Previously Sampled Water Source in the COGIS database be used to meet sampling requirements as described in Rule 609.d.(3).

**NOTE: If this Sundry Notice is being submitted to request a Ground Water Sampling Exception it cannot be used for any other purpose except requesting the use of a Previously Sampled Water Source in the COGIS database.**

- Request an Exception to Ground Water Sampling Requirements per Greater Wattenberg Area Rule 318A.e(4): There are no Available Water Sources located within the governmental quarter section or within a previously unsampled governmental quarter section within a 1/2-mile radius of this proposed Oil and Gas Well, Multi-Well Site, or Dedicated Injection Well.
- Request an Exception to Ground Water Sampling Requirements per Statewide Rule 609.c.
  - 2 Number of Water Sources located within one-half (1/2) mile of a proposed Oil and Gas Well, Multi-Well Site, or Dedicated Injection Well.
  - 2 Number of Water Source Exceptions requested per Rule 609.c.
  - 0 Number of Water Sources determined to be unsuitable. **The condition of these Water Sources MUST be documented in the comments below or in an attachment.**
  - 0 Number of Water Sources suitable for testing whose owners refused to grant access despite an operator's reasonable good faith efforts to obtain consent to conduct sampling. **The reasonable good faith efforts used to obtain access from the owners of these Water Sources MUST be documented in the comments below or in an attachment.**
- Request a Previously Sampled Water Source in the COGIS database be used to meet sampling requirements as described in Rule 318A.f.(2)A. (for Initial Baseline (pre-drill) ONLY) or 609.d.(3).

Pre\_Drill Type of Sample Substitution Request

Enter Sample ID Number from COGIS Maps for each Previous Water Sample:

Sample ID	Facility ID	Sample Date	Sample Purpose
561112	755924	08/31/2017	609Pre
561111	755923	08/31/2017	609Pre

**COMMENTS**

Two available water sources were identified within a 1/2 mile radius of well pad PA 34-24 (Facility ID 454383) for Rule 609 baseline sampling. Both sources were sampled August 31, 2017. Please see attached document for details. This sundry applies to API numbers:

05-045-23888  
 05-045-23889  
 05-045-23890  
 05-045-23891  
 05-045-23892  
 05-045-23893  
 05-045-23894  
 05-045-23895  
 05-045-23896  
 05-045-23897  
 05-045-23898

**Operator Comments:**

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

Signed: \_\_\_\_\_ Print Name: Jessie Pahler  
 Title: Project Scientist Email: jpahler@westernwaterandland.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:**

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

**General Comments**

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

Total: 0 comment(s)

**Attachment Check List**

<u>Att Doc Num</u>	<u>Name</u>
402143224	OTHER

Total Attach: 1 Files