

State of Colorado Oil and Gas Conservation Commission

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Phone: (303) 894-2100 Fax: (303) 894-2109



| | | | |
|--------------------------------------|----|----|----|
| DE | ET | OE | ES |
| Document Number: <u>401943520</u> | | | |
| Date Received: <u>02/19/2019</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: 69175 Contact Name Ally Ota
Name of Operator: PDC ENERGY INC Phone: (303) 860-5800
Address: 1775 SHERMAN STREET - STE 3000 Fax: ()
City: DENVER State: CO Zip: 80203 Email: alexandria.ota@pdce.com

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 123 49117 00 OGCC Facility ID Number: 459971
Well/Facility Name: Sunlight Well/Facility Number: 3N
Location QtrQtr: NWSW Section: 8 Township: 5N Range: 64W Meridian: 6
County: WELD Field Name: WATTENBERG
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 _____ GPS Quality Value: _____ Type of GPS Quality Value: PDOP Measurement Date: _____
Longitude _____ GPS Instrument Operator's Name _____

LOCATION CHANGE (all measurements in Feet)

Well will be: HORIZONTAL (Vertical, Directional, Horizontal)

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

| FNL/FSL | | FEL/FWL | |
|-------------|------------|------------|------------|
| <u>1488</u> | <u>FSL</u> | <u>487</u> | <u>FWL</u> |
| | | | |

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

Current **Surface** Location **From** QtrQtr NWSW Sec 8
New **Surface** Location **To** QtrQtr _____ Sec _____

Twp 5N Range 64W Meridian 6
Twp _____ Range _____ Meridian _____

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

| | | | |
|-------------|------------|------------|------------|
| <u>1830</u> | <u>FSL</u> | <u>215</u> | <u>FWL</u> |
| | | | |

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

Current **Top of Productive Zone** Location **From** Sec 8
New **Top of Productive Zone** Location **To** Sec _____

Twp 5N Range 64W
Twp _____ Range _____

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

| | | | |
|-------------|------------|------------|------------|
| <u>1830</u> | <u>FSL</u> | <u>500</u> | <u>FEL</u> |
| <u>1830</u> | <u>FSL</u> | <u>150</u> | <u>FEL</u> |

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

Current **Bottomhole** Location Sec 9 Twp 5N
New **Bottomhole** Location Sec 9 Twp 5N

Range 64W ** attach deviated drilling plan
Range 64W

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: 248

Ground Elevation _____ feet Surface owner consultation date _____

CHANGE OR ADD OBJECTIVE FORMATION AND/OR SPACING UNIT

| <u>Objective Formation</u> | <u>Formation Code</u> | <u>Spacing Order Number</u> | <u>Unit Acreage</u> | <u>Unit Configuration</u> |
|----------------------------|-----------------------|-----------------------------|---------------------|---------------------------|
| NIOBRARA | NBRR | 407-3034 | 800 | S 8, 9: S2S2N2, S2 |

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 SUNLIGHT Number 3N 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 07/01/2019

☐ REPORT OF WORK DONE Date Work Completed _____

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

COMMENTS:

Revised OWE attached.

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 |
|----------------|------|----|---|------|------|----|---|--------|-------|------------|---------------|-----------------|---------------|------------|
| Surface String | 12 | 1 | | 4 | 9 | 5 | | 8 | 36 | 0 | 1600 | 920 | 1600 | 0 |
| First String | 8 | 1 | | 2 | 5 | 1 | | 2 | 20 | 0 | 17396 | 2035 | 17396 | 0 |

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

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

Operator Comments:

This sundry is being submitted to revise the BHL footage and change the spacing from WBSU to DSU. DSU is scheduled for the April hearing, Docket No. 190300253.

Distance to the nearest well has been updated to include only wells within the DSU. Distance measured to the proposed Sunlight 2N via the anti-collision report attached in the deviated drilling plan.

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

Signed: _____ Print Name: Ally Ota
Title: Regulatory Tech Email: alexandria.ota@pdce.com Date: 2/19/2019

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

COGCC Approved: Faber, Laurel Date: 2/28/2020

CONDITIONS OF APPROVAL, IF ANY:

| COA Type | Description |
|-----------------|--|
| | 317.r No additional wells within 150'. 317.s Seyler State B15-79HNM (API 123-37180) |

General Comments

| User Group | Comment | Comment Date |
|-------------------|--|---------------------|
| Engineer | Updated proposed_depth in well update. | 04/01/2019 |
| Engineer | OWE complete, no additional mitigation required. | 04/01/2019 |

Total: 2 comment(s)

Attachment Check List

| Att Doc Num | Name |
|--------------------|---|
| 401943520 | SUNDRY NOTICE APPROVED-LOC-OBJ-DRLG-CSG |
| 401943523 | DEVIATED DRILLING PLAN |
| 401943524 | DIRECTIONAL DATA |
| 401943525 | WELL LOCATION PLAT |
| 401943526 | OFFSET WELL EVALUATION |
| 401943558 | STIMULATION SETBACK CONSENT |
| 402327334 | FORM 4 SUBMITTED |

Total Attach: 7 Files