

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
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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: 10149 Contact Name Mark Mazza
 Name of Operator: DEINES* JON E DBA DEINES MAZZA PARTNERSHIP Phone: (970) 5327146
 Address: 901 N COUNTY RD 21 Fax: ()
 City: BERTHOUD State: CO Zip: 80513 Email: WATERFARMER77@GMAIL.COM

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 069 06105 00 OGCC Facility ID Number: 216918
 Well/Facility Name: FAGGAN FARMS Well/Facility Number: 1
 Location QtrQtr: NESE Section: 17 Township: 4N Range: 69W Meridian: 6
 County: LARIMER Field Name: BERTHOUD
 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: _____ Measurement Date: _____
 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 NESE 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 _____

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	
<input type="text" value="1646"/>	<input type="text" value="FSL"/>	<input type="text" value="333"/>	<input type="text" value="FEL"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Twp <input type="text" value="4N"/>	Range <input type="text" value="69W"/>	Meridian <input type="text" value="6"/>	
Twp <input type="text"/>	Range <input type="text"/>	Meridian <input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="**"/>
Twp <input type="text"/>	Range <input type="text"/>		
Twp <input type="text"/>	Range <input type="text"/>		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="**"/>
Range <input type="text"/>			
Range <input type="text"/>			

** attach deviated drilling plan

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 09/13/2019

<input type="checkbox"/> Intent to Recomplete (Form 2 also required)	<input type="checkbox"/> Request to Vent or Flare	<input type="checkbox"/> E&P Waste Mangement 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>Dom. well report</u>	<input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases	

COMMENTS:

Name of Person Completing Report (Print) _____ Mark Mazza _____
 (Signature) - sign document when submitting
 Date Completed _____

Contact Information _____

Street _____ 1891 Rd 63 _____
 City _____ Potter _____

State _____ NE _____ Zip _____ 69156 _____
 Phone _____ 970-566-0352 _____ Emergency Contact Phone _____
 Email _____ WATER_FARMER77@GMAIL.COM _____

- 1) Are you the registered owner/operator of the well? Yes No
- 2) Is there a Designated Agent reporting on your behalf? Yes No
- 3) Are you clearly aware of your liabilities regarding this well under COGCC Rules?
 Yes No
- 4) Are you currently using the gas from this well? Yes No
- 5) How many homes, buildings and/or tenants use gas from this well? _____
- 6) If the well is not producing gas, when was it used last? _____ 2017 _____
- 7) What is the gas used for (home, outbuildings, irrigation engine, etc.)? -
 Home _____
- 8) If in current use, does well adequately provide gas for intended use or must it be allowed to build pressure/volume between uses?

9) If well must be allowed buildup time, approximately how long is that period? _____

10) Is the gas dry or must liquids be removed? How often?

Dry Liquids Removed _____

11) If liquids are removed from gas, approximately how much fluid does that amount to and what is done with that liquid (hauled off, allowed to evaporate...)? Is the liquid stored in a tank or an earthen pit?

Amount (estimate) _____ Tank Earthen Pit

12) Have you ever performed any maintenance on the casing or wellbore? What type of maintenance, and when was it performed?

Yes No Date Maintenance Performed _____

Maintenance _____

13) Are you aware of any current well casing, wellhead, or equipment leaks associated with the well? Yes No

14) Has any bubbling, stained soil, or stressed vegetation been observed near the domestic gas well? Yes No

15) Is a domestic water well, stream or irrigation ditch/canal located within 1/2 mile of the domestic gas well? How far away? Has any bubbling or have any unusual odors been observed in water from the domestic water well?

Near Water Well/Stream/Irrigation Ditch/Canal Yes No

Approximate Distance to Water Well _____ 1/4 mile _____

Bubbling/Odors Yes No

16) Is the well currently accessible by vehicle (passable roads, locked gates)? Yes No

17) Does the current signage for the well meet the requirements of Rule 210? Yes No

a. Operator name Yes No

b. Phone number where operator can be reached 24/7 Yes No

c. Phone number for local emergency services Yes No

d. Well's legal location including quarter quarter section Yes No

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:

<u>Best Management Practices</u>	
<u>No BMP/COA Type</u>	<u>Description</u>

Operator Comments:

18) Provide these details to register the domestic tap associated with this well

- a. Operator Information (contact info) _____ Mark Mazza _____
- b. Domestic Tap Well location ID or API (API # top of Sundry) _____ 216418 _____
- c. Domestic Tap Facility Information:
 - Installation/Discovery Date (original well date) _____
 - Well-side tap(s) Latitude/Longitude (starting point of tap (wellhead))
 - o Latitude _____
 - o Longitude _____
 - Street address(es) or Lat/Long of the Point(s) of Delivery _____

- 19) Is there an odorant supplied for the methane? Yes___ No___
- 20) Is there a methane detector in the building supplied by the tap? Yes___ No___

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

Signed: _____ Print Name: Mark Mazza
Title: owner Email: WATERFARMER77@GMAIL.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>

Total Attach: 0 Files