

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



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### Submit By Other Operator

Document Number:

402375772

Date Received:

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:	10633	Contact Name	Meghan	Mearsha
Name of Operator:	CRESTONE PEAK RESOURCES OPERATING LLC		Phone:	(720) 410-8487
Address:	1801 CALIFORNIA STREET #2500		Fax:	( )
City:	DENVER	State:	CO	Zip: 80202
		Email:	meghan.mearsha@crestonepr.com	

### Complete the Attachment Checklist

OP OGCC

API Number :	05-	005	07452	00	OGCC Facility ID Number:	465465
Well/Facility Name:	STATE MASSIVE 5-65 2-3			Well/Facility Number:	2AH	
Location	QtrQtr:	SENE	Section:	2	Township:	5S
					Range:	65W
					Meridian:	6
County:	ARAPAHOE		Field Name:	DJ HORIZONTAL NIOBRARA		
Federal, Indian or State Lease Number:	1960.12					

Survey Plat		
Directional Survey		
Srvc Eqpmnt Diagram		
Technical Info Page		
Other		

☒ 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: HORIZONTAL (Vertical, Directional, Horizontal)

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

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

Current <b>Surface</b> Location From	QtrQtr	SENE	Sec	2
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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 <b>Top of Productive Zone</b> Location From	Sec	2
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New **Top of Productive Zone** Location To Sec 2

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? No

Distance, in feet, to nearest building 5280 , public road: 5280 , above ground utility: 336 , railroad: 5280 ,

property line: 375 , lease line: 0 , well in same formation: 615

Ground Elevation	5828	feet	Surface owner consultation date
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FNL/FSL		FEL/FWL		
1885	FNL	375	FEL	
Twp 5S		Range 65W	Meridian	6
Twp		Range	Meridian	
1684	FNL	460	FEL	
1860	FNL	460	FEL	**
Twp 5S		Range 65W		
Twp 5S		Range 65W		
1684	FNL	325	FWL	
1860	FNL	460	FWL	**
Range 65W		** attach deviated drilling plan		
Range 65W				

\*\* attach deviated drilling plan

**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>

**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 STATE MASSIVE 5-65 2-3 Number 2AH 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 (Form 2) – 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 05/11/2020

☐ 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:

#### 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
Conductor Casing	24				16				42	0	100	86	100	0
Surface String	13	1		2	9	5		8	40	0	2250	1212	2250	0
First String	8	1		2	5	1		2	20	0	18045	2626	18045	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**

<b><u>No</u></b>		<b><u>BMP/COA Type</u></b>	<b><u>Description</u></b>

**Operator Comments:**

Crestone proposes to change the TPZ, BHL and casing plans. No SHL changes are proposed.

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

Signed: \_\_\_\_\_ Print Name: Meghan Mearsha

Title: Senior Regulatory Analyst Email: meghan.mearsha@crestonepr.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:****COA Type****Description**

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

		Stamp Upon Approval
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Total: 0 comment(s)

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

402381804	DEVIATED DRILLING PLAN
402381805	OTHER
402381810	WELL LOCATION PLAT
402381817	DIRECTIONAL DATA

Total Attach: 4 Files