FORM 4
Rev 02/20

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

Document Number: 402469075

Date Received: 08/18/2020

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: 14855 Contact Name: Conner Staley

Name of Operator: CENTRAL OPERATING INC Phone: (303) 894-9576

Address: 1600 BROADWAY STE 1050 Fax: ( )

City: DENVER State: CO Zip: 80202 Email: coidenverproduction@gmail.com

Complete the Attachment Checklist

OP OGCC

API Number : 05- 121 08988 00 OGCC Facility ID Number: 236498

Well/Facility Name: STATE Well/Facility Number: 3

Location QtrQtr: NWSW Section: 36 Township: 3S Range: 51W Meridian: 6

County: WASHINGTON Field Name: STIRRUP

Federal, Indian or State Lease Number: CO 68/4808-S

Attachment Checklist	OP	OGCC
Survey Plat		
Directional Survey		
Srfc 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)

	FNL/FSL		FEL/FWL		
Change of **Surface** Footage **From** Exterior Section Lines:	2050	FSL	800	FWL	
Change of **Surface** Footage **To** Exterior Section Lines:					

Current **Surface** Location **From** QtrQtr NWSW Sec 36 Twp 3S Range 51W Meridian 6

New **Surface** Location **To** QtrQtr Sec Twp Range Meridian

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 Twp Range

New **Top of Productive Zone** Location **To** Sec Twp Range

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

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

Current **Bottomhole** Location Sec Twp Range ** attach deviated drilling plan

New **Bottomhole** Location Sec Twp Range

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 _____

CHANGE OR ADD OBJECTIVE FORMATION AND/OR SPACING UNIT

Objective Formation	Formation Code	Spacing Order Number	Unit Acreage	Unit Configuration

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 Number 3 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 08/24/2020

☐ 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:

In March 2020 a casing leak was detected while attempting a tubing repair. A CIBP was set below the leak at around 3,815' to isolate the perfs from the casing leak zone. A 4-1/2" liner will be run and cemented to surface to mitigate the leak and re-establish wellbore integrity. The attached WBD shows the current wellbore state, and the new wellbore state after the liner is installed.

Below is a proposed procedure for the repair to accompany the WBD:

1) Tally tubing in hole and tag CIBP to confirm set depth of 3,815'
2) TOOH with tubing and lay down
3) RIH with 4-1/2" liner and set at approx. 3,810'
4) Pump cement down 4-1/2" liner and circulate up 5-1/2" / 4-1/2" annulus to surface. My calculations indicate that approximately 22 bbl of cement will be required to circulate to surface including 20% excess.
5) RIH with tubing and drill out cement, float shoe, and mill/push 5-1/2" CIBP to bottom
6) RU Wireline and run CBL to determine new cement coverage in 4-1/2" liner
7) RIH with perforation guns and reperforate D-Sand 3,854-3,858'
8) Hang well on & return to production

Additional Notes: The COGIS data system lists the production hole at 9-1/2". This is incorrect, the correct hole size is 7-7/8" and is listed on a handful of wellfile documents from drilling and completion of the well. The estimated TOC from the original completion is estimated at 3,217' (125 sacks of 50/50 poz + 2% gel).

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
1ST LINER	5	1		2	4	1		2	10.5	0	3810	100	3810	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

No	BMP/COA Type	Description

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: Conner Staley

Title: Engineer Email: coidenverproduction@gmail.com Date: 8/18/2020

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

COGCC Approved: Wolfe, Stephen Date: 9/14/2020

CONDITIONS OF APPROVAL, IF ANY:

COA Type	Description
	1) Prior to starting operations a bradenhead test shall be performed. If, before opening the bradenhead valve, the beginning pressure is greater than 25 psi, sampling is required. If pressure remains at the conclusion of the test, or if any liquids were present during the test, sampling is required. The Form 17 shall be submitted within 10 days of the test. Sampling shall comply with Operator Guidance - Bradenhead Testing and Reporting Instructions. If samples are collected, copies of all final laboratory analytical results shall be provided to the COGCC within three (3) months of collecting the samples. If sampling is required notify COGCC Area Engineer to confirm procedure. 2) Upon pumping cement to the surface in the liner-casing annulus, pump a minimum of 30 sx (1.15) of cement down the liner-casing annulus and squeeze through the hole in casing at 1900', adjust cement volume accordingly for actual cement yield. If cement does not come to surface, pump a minimum of 30 sx (1.15) of cement down the liner-casing annulus and displace with 43 sx (annular volume 0-1900'). adjust cement volume accordingly for actual cement yield. Contact COGCC Area Engineer if squeeze volumes cannot be achieved. 3) WOC and run a CBL on the cemented liner. 4) Perform offical MIT, with notice, before returning to production. File Form 21. 4) File Form 5 with operations summary and any logs within 30 days of completion. 5) At 30 days repeat a bradenhead test as described in 1).

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)

Attachment Check List

Att Doc Num	Name
402469075	SUNDRY NOTICE APPROVED-REPAIR-CSG
402469108	WELLBORE DIAGRAM
402488910	FORM 4 SUBMITTED

Total Attach: 3 Files