

**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:<br><b>402504515</b> |    |    |    |
| 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: 10720 Contact Name Anders Elgerd  
 Name of Operator: KODA EXPLORATION LLC Phone: (303) 915-2555  
 Address: 2443 SOUTH UNIVERSITY BLVD 215 Fax: ( )  
 City: DENVER State: CO Zip: 80210 Email: elgerd@comcast.net

Complete the Attachment  
Checklist

OP OGCC

API Number : 05- 073 06774 00 OGCC Facility ID Number: 472941  
 Well/Facility Name: Roaring Fork Well/Facility Number: 14-28  
 Location QtrQtr: SESW Section: 28 Township: 16S Range: 54W Meridian: 6  
 County: LINCOLN Field Name: WILDCAT  
 Federal, Indian or State Lease Number: \_\_\_\_\_

|                     |  |  |
|---------------------|--|--|
| 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)

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

|                                  |                                  |                                   |                                  |
|----------------------------------|----------------------------------|-----------------------------------|----------------------------------|
| FNL/FSL                          |                                  | FEL/FWL                           |                                  |
| <input type="text" value="693"/> | <input type="text" value="FSL"/> | <input type="text" value="1774"/> | <input type="text" value="FWL"/> |

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

|                      |                      |                      |                      |
|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|----------------------|

Current **Surface** Location **From** QtrQtr  Sec

Twp  Range  Meridian

New **Surface** Location **To** QtrQtr  Sec

Twp  Range  Meridian

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

|                      |                      |                      |                      |
|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|----------------------|

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

|                      |                      |                      |                      |    |
|----------------------|----------------------|----------------------|----------------------|----|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | ** |
|----------------------|----------------------|----------------------|----------------------|----|

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:

|                      |                      |                      |                      |
|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|----------------------|

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

|                      |                      |                      |                      |    |
|----------------------|----------------------|----------------------|----------------------|----|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | ** |
|----------------------|----------------------|----------------------|----------------------|----|

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 \_\_\_\_\_



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 11/09/2020

REPORT OF WORK DONE Date Work Completed \_\_\_\_\_

|  |   |  |
|--|---|--|
| <input type="checkbox"/> Intent to Recomplete (Form 2 also required) | <input checked="" 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 type="checkbox"/> Other _____                                 | <input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases          |  |

**COMMENTS:**

KODA requests to flare at the Roaring Fork 14-28 pursuant to Rule 912.b.

Pursuant to Rule 912.b., the following information is being provided for COGCC to review the request to flare:

1. The estimated gas rate is anticipated to be 100 MCFD; the estimated amount of gas that would be flared annually is approx. 16-31 MMCF out of an estimated 36.5 MMCF of gas expected to be produced.
2. Hydrogen sulfide is anticipated to be between 0.5 - 1.00 ppm, a gas analysis will be submitted upon completion of this well.
3. This request is based on a lack of midstream infrastructure as this well is in a remote area. The cost to bring in infrastructure to this area would be approx. \$6.5-9.5M.
- 4.a. The operator is intending to flare the associated gas and therefore will comply with the odor provisions of Rule 805.b.(1).
- 4.c. KODA is exploring several options for the use of gas on their wells, they include the following: On-location use for production equipment; Use of gas to generate electric power; Natural gas liquids processing; Use of gas for produced water evaporation; Reinjection of gas in to formation for pressure maintenance and/or storage for future use.
5. KODA intends to use an ECD to flare produced gas that cannot be consumed on site as fuel (see statement #1) during the COGCC approved flaring allowance period. All permitting and compliance provisions for the CDPHE are in process and will be followed as required.

See attachment for additional flare request supplemental information.

**CASING AND CEMENTING CHANGES**

**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:**

This sundry is being submitted as a Request to Flare on the Roaring Fork 14-28 well pursuant to Rule 912.b.. Attached is a supplemental letter and additional detailed information sheet.

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

Signed: \_\_\_\_\_ Print Name: Ashley Noonan  
Title: Regulatory Consultant Email: anoonan@progressivepcs.net 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> |
|-------------------|---|---------------------|
| Engineer          | Returned to draft. Per rule 912.b this should be a Request to Flare rather than a Variance request. | 11/06/2020          |

Total: 1 comment(s)

**Attachment Check List**

| <u>Att Doc Num</u> | <u>Name</u>      |
|--------------------|------------------|
| 402504986          | VARIANCE REQUEST |
| 402504988          | OTHER            |
| 402527452          | OTHER            |
| 402527453          | OTHER            |

Total Attach: 4 Files