

**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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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: 10112 Contact Name Alyssa Beard
 Name of Operator: FOUNDATION ENERGY MANAGEMENT LLC Phone: (303) 244-8114
 Address: 5057 KELLER SPRINGS RD STE 650 Fax: ()
 City: ADDISON State: TX Zip: 75001 Email: regulatory@foundationenergy.com

Complete the Attachment Checklist

OP OGCC

API Number : 05- 103 10434 00 OGCC Facility ID Number: 272011
 Well/Facility Name: COLUMBINE SP FED Well/Facility Number: 7C-11-4-104
 Location QtrQtr: NWSE Section: 11 Township: 4S Range: 104W Meridian: 6
 County: RIO BLANCO Field Name: BAXTER PASS
 Federal, Indian or State Lease Number: COC 10179

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:	<input type="text" value="1785"/>	<input type="text" value="FSL"/>	<input type="text" value="1529"/>	<input type="text" value="FEL"/>
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 <input type="text" value="NWSE"/> Sec <input type="text" value="11"/>	Twp <input type="text" value="4S"/>	Range <input type="text" value="104W"/>	Meridian <input type="text" value="6"/>	
New Surface Location To QtrQtr <input type="text"/>	Twp <input type="text"/>	Range <input type="text"/>	Meridian <input type="text"/>	
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" value="**"/>
Current Top of Productive Zone Location From Sec <input type="text"/>	Twp <input type="text"/>	Range <input type="text"/>		
New Top of Productive Zone Location To Sec <input type="text"/>	Twp <input type="text"/>	Range <input type="text"/>		
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" value="**"/>
Current Bottomhole Location Sec <input type="text"/> Twp <input type="text"/> Range <input type="text"/>				** attach deviated drilling plan
New Bottomhole Location Sec <input type="text"/> Twp <input type="text"/> Range <input type="text"/>				

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 09/28/2018 Has Production Equipment been removed from site? No

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 _____

<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 type="checkbox"/> Other _____	<input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases	

COMMENTS:

The Columbine Springs well have utility as producers at a sustained \$3.25/mcf. The CBM field's water production at lower gas prices makes the well uneconomic. The wells are unable to produce without moving water. Future plans to reactivate the well are pending. The wells have a cast iron bridge plug @ 1475', above the perms, and a wellhead master valve at the surface. The well was last MIT'd in September, 2018.

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:

The Columbine Springs well have utility as producers at a sustained \$3.25/mcf. The CBM field's water production at lower gas prices makes the well uneconomic. The wells are unable to produce without moving water. Future plans to reactivate the well are pending. The wells have a cast iron bridge plug @ 1475', above the perms, and a wellhead master valve at the surface. The well was last MIT'd in September, 2018.
Thanks

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

Signed: _____ Print Name: Alyssa Beard
Title: HSE Manager Email: regulatory@foundationenergy.com Date: 7/21/2020

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

COGCC Approved: Duran, Alicia Date: 11/11/2020

CONDITIONS OF APPROVAL, IF ANY:

<u>COA Type</u>	<u>Description</u>
	<p>Perform a bradenhead test and submit a Form 17 prior to submittal of the next year's request for continued TA status.</p> <p>This approval is good for one year and a new application must be made before July 21, 2021 (1 year from prior application). Updates for the planned utilization of the well should be included with the application.</p> <p>The Form 7, Operators Report of Monthly Operations, must correctly reflect the well status and dates reported on the Form 4, Sundry Notice-Request for Continued Temporarily Abandoned Status.</p>

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>
402072737	SUNDRY NOTICE APPROVED-TA
402530659	FORM 4 SUBMITTED

Total Attach: 2 Files