

**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: 402553119			
Date Received: 12/14/2020			

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: 10071 Contact Name Allie Ryan
 Name of Operator: HIGHPOINT OPERATING CORPORATION Phone: (303) 312-8153
 Address: 555 17TH ST STE 3700 Fax: ()
 City: DENVER State: CO Zip: 80202 Email: aryan@hpres.com

Complete the Attachment Checklist
OP OGCC

API Number : 05- 123 50647 00 OGCC Facility ID Number: 470097
 Well/Facility Name: Siebring Well/Facility Number: 63-32-2424BN
 Location QtrQtr: SENE Section: 32 Township: 5N Range: 63W Meridian: 6
 County: WELD Field Name: WATTENBERG
 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 _____

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	<input type="text" value="SENE"/>	Sec	<input type="text" value="32"/>	Twp	<input type="text" value="5N"/>	Range	<input type="text" value="63W"/>	Meridian	<input type="text" value="6"/>
New Surface Location To	QtrQtr	<input type="text"/>	Sec	<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:

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

Current Top of Productive Zone Location From	Sec	<input type="text" value="32"/>	Twp	<input type="text" value="5N"/>	Range	<input type="text" value="63W"/>
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:

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

Current Bottomhole Location	Sec	<input type="text" value="33"/>	Twp	<input type="text" value="5N"/>	Range	<input type="text" value="63W"/>	** 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 _____ 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 09/09/2020

REPORT OF WORK DONE Date Work Completed _____

- Intent to Recomplete (Form 2 also required)
- Change Drilling Plan
- Gross Interval Change
- Bradenhead Plan
- Other _____
- Request to Vent or Flare
- Repair Well
- Rule 502 variance requested. Must provide detailed info regarding request.
- Status Update/Change of Remediation Plans for Spills and Releases
- E&P Waste Mangement Plan
- Beneficial Reuse of E&P Waste

COMMENTS:

Bradenhead pressure was found to be greater than 50 psi. Samples have been collected for analysis to aid in determining origin of gas.

HPOC is blowing down the Bradenhead daily for a 3-6 month period and will maintain pressure records for a re-evaluation of the stabilized Bradenhead pressures at that time. We will update the state on our progress by submitting a follow-up Form 17 and Form 4 at the end of this period.

CASING PROGRAM

(No Casing Provided)

POTENTIAL FLOW AND CONFINING FORMATIONS

(No Casing Provided)

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</u>	<u>BMP/COA Type</u>	<u>Description</u>

Operator Comments:

[Empty box for 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: Allie Ryan
Title: Regulatory Analyst Email: aryan@hpres.com Date: 12/14/2020

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

COGCC Approved: McFarland, Nick Date: 12/17/2020

CONDITIONS OF APPROVAL, IF ANY:

<u>COA Type</u>	<u>Description</u>
	Shut in bradenhead pressure shall not exceed 50 psig.
	1. Operator will implement measures to control venting, to protect health and safety, and to ensure that vapors and odors from well operations do not constitute a nuisance or hazard to public welfare. 2. Prior to starting bradenhead mitigation, if a sample has not been collected within the last twelve months collect bradenhead and production gas samples for laboratory analysis. Sampling will comply with Operator Guidance - Bradenhead Testing and Reporting Instructions, Appendix A: Liquid and Gas Sampling. Copies of all final laboratory analytical results will be provided to the COGCC within three months of collecting the samples. 3. Operator will implement measures to get an initial estimate of the gas flow rate and/or volume from the bradenhead. During the shut-in period record pressure data to adequately characterize the build-up. 4. By 3/9/2021, conduct a new bradenhead test and submit the Form 17 within ten days of the test and submit a Form 4 Sundry that summarizes current well condition. The sundry should include details of the future plans, sample analysis interpretation, and the flow rate information and pressure data.

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineer	"5/26/20 - BH test 55 psi 9/9/20 - BH test 30 psi 12/14/20 - 1st sundry for blowdowns" This form was filed late and was due within 60 days of the BH test on 5/26/20.	12/17/2020

Total: 1 comment(s)

Attachment List

<u>Att Doc Num</u>	<u>Name</u>
402553119	SUNDRY NOTICE APPROVED
402556351	FORM 4 SUBMITTED

Total Attach: 2 Files