

**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: <b>402590547</b>			
Date Received: <b>02/03/2021</b>			

**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: 10456 Contact Name Holly Hill  
 Name of Operator: CAERUS PICEANCE LLC Phone: (720) 574-8746  
 Address: 1001 17TH STREET #1600 Fax: ( )  
 City: DENVER State: CO Zip: 80202 Email: regulatory@caerusoilandgas.com

Complete the Attachment  
Checklist

OP OGCC

API Number : 05- 045 15149 00 OGCC Facility ID Number: 293866  
 Well/Facility Name: PARACHUTE RANCH FED Well/Facility Number: 35-42A  
 Location QtrQtr: NWNE Section: 35 Township: 7S Range: 96W Meridian: 6  
 County: GARFIELD Field Name: GRAND VALLEY  
 Federal, Indian or State Lease Number: COC64739

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:

	FNL/FSL		FEL/FWL
	924	FNL	1517
			FEL

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

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Current **Surface** Location **From** QtrQtr NWNE Sec 35

Twp	<u>7S</u>	Range	<u>96W</u>	Meridian	<u>6</u>
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New **Surface** Location **To** QtrQtr \_\_\_\_\_ Sec \_\_\_\_\_

Twp	_____	Range	_____	Meridian	_____
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Change of **Top of Productive Zone** Footage **From** Exterior Section Lines:

	1503	FNL	626	FEL
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Change of **Top of Productive Zone** Footage **To** Exterior Section Lines:

				**
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Current **Top of Productive Zone** Location **From** Sec 35

Twp	<u>7S</u>	Range	<u>96W</u>
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New **Top of Productive Zone** Location **To** Sec \_\_\_\_\_

Twp	_____	Range	_____
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Change of **Bottomhole** Footage **From** Exterior Section Lines:

	1503	FNL	626	FEL
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Change of **Bottomhole** Footage **To** Exterior Section Lines:

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Current **Bottomhole** Location Sec 35 Twp 7S Range 96W

\*\* 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 \_\_\_\_\_

REPORT OF WORK DONE Date Work Completed 08/05/2020

- |  |   |  |
|--|---|--|
| <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"/> Bradenhead Plan                                       | <input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases          |  |
| <input checked="" type="checkbox"/> Other <u>Alternate MIT request (417.b)</u> |   |  |

**COMMENTS:**

Caerus Piceance LLC (Caerus) respectfully requests an altnernative to performing a MIT on this well per Rule 417.b, and to utilize the Bradenhead Test Report, conducted 7/31/20 (document number 402466531), in lieu of performing the MIT. Caerus intends to plug and abandon this well no later than December 31st, 2021 and will file the appropriate NOIA request pursuant to Rule 434.a to request permission to plug this well.

**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:

<b><u>Best Management Practices</u></b>		
<b><u>No</u></b>	<b><u>BMP/COA Type</u></b>	<b><u>Description</u></b>

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: Holly Hill  
Title: Regulatory Manager Email: regulatory@caerusoilandgas.com Date: 2/3/2021

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

COGCC Approved: Katz, Aaron Date: 2/11/2021

**CONDITIONS OF APPROVAL, IF ANY:**

<u>COA Type</u>	<u>Description</u>
	1) Complete a Form 17 Bradenhead Test by 8/28/2020 and submit paperwork via eForm. Form 17 DOC# 402466531 completed on 7/31/2020 meets this COA. 2) Alternative MIT is valid until 12/31/2021, contingent on Plug and Abandonment operations being completed. 3) Submit a Form 6 NOI a minimum of 60 days prior to the planned plugging start date. 4) If well is plugged after 7/31/2020, at least once a year shut in bradenhead for 7 days or until the pressure reaches the bradenhead threshold and perform a bradenhead test. Report results on a Form 17, as specified in Rule 420 or other Director approved submittal method.

**General Comments**

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineer	Caerus has submitted to the COGCC a list of wells, including API# 05-045-15149, which will be part of 2021 plugging operations.  Form 17 DOC# 402466531. BH Pressure 0 psi. with no flow.	02/11/2021
Permit	A task has been opened for engineering to review this document	02/10/2021

Total: 2 comment(s)

**Attachment List**

<u>Att Doc Num</u>	<u>Name</u>
402590547	SUNDRY NOTICE APPROVED-OTHER
402597745	FORM 4 SUBMITTED

Total Attach: 2 Files