

State of Colorado
Oil and Gas Conservation Commission

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DE	ET	OE	ES
Document Number: 402601616			
Date Received: 02/17/2021			

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: 96850 Contact Name Vicki Schoeber
 Name of Operator: TEP ROCKY MOUNTAIN LLC Phone: (970) 263-2721
 Address: PO BOX 370 Fax: ()
 City: PARACHUTE State: CO Zip: 81635 Email: vschoeber@terraep.com

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 103 12465 00 OGCC Facility ID Number: 478382
 Well/Facility Name: FEDERAL Well/Facility Number: RG 543-18-297
 Location QtrQtr: NWNE Section: 18 Township: 2S Range: 97W Meridian: 6
 County: RIO BLANCO Field Name: SULPHUR CREEK
 Federal, Indian or State Lease Number: COC0003453

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="NWNE"/>	Sec	<input type="text" value="18"/>	Twp	<input type="text" value="2S"/>	Range	<input type="text" value="97W"/>	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="18"/>	Twp	<input type="text" value="2S"/>	Range	<input type="text" value="97W"/>
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="18"/>	Twp	<input type="text" value="2S"/>	Range	<input type="text" value="97W"/>	** 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 02/17/2021

REPORT OF WORK DONE Date Work Completed _____

- Intent to Recomplete (Form 2 also required)
- Change Drilling Plan
- Gross Interval Change
- Bradenhead Plan
- Other Alternative Centralizer Program
- 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:

TEP Rocky Mountain LLC (TEP) would like to propose modifying the surface hole casing centralization plan pursuant to COGCC Rule 408.g.(1)E on the Federal RG 543-18-297 well.

With the high loss circulation in the Ryan Gulch field during drilling through the Dissolution Surface section from ~1700-2200', TEP would like to eliminate centralizers from 1156' MD to surface. A total of 14 centralizers were installed per COGCC Rule 408.g.1.b.c.d. with top centralizer placed 1156' MD. The DV tool was installed at 1325'-1322' MD.

With the difficulty achieving cement to surface on various wells and having to run 1.9" tubing down deep to get the surface hole topped off, it makes it near impossible to run the tubing through the centralizers if we follow the COGCC requirement per Rule 408.g.(1) A, D. This will assist in topping out and obtaining quality cement to surface and minimize any voids throughout that interval by not reaching the top of cement after pumping the second stage cement job.

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:

Best Management Practices

No BMP/COA Type

Description

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: Vicki Schoeber
Title: Regulatory Specialist Email: vschoeber@terraep.com Date: 2/17/2021

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: 2/23/2021

CONDITIONS OF APPROVAL, IF ANY:

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

<u>General Comments</u>		
<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineer	<p>Alternative surface casing centralizer program will allow for subsequent top out cement operations to effectively provide zonal isolation.</p> <p>The upper most centralizer depth is determined based on geologic and historical data of loss zones. This is the estimated maximum anticipated depth top out tubing would need to be run to.</p> <p>Bureau of Land Management has been consulted on the alternative centralizer program.</p>	02/23/2021

Total: 1 comment(s)

Attachment List

<u>Att Doc Num</u>	<u>Name</u>
402601616	SUNDRY NOTICE APPROVED-OTHER
402607514	FORM 4 SUBMITTED

Total Attach: 2 Files