

**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>402653109</b>			
Date Received: <b>04/08/2021</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: 10705 Contact Name Mackenzie Smith  
Name of Operator: EVERGREEN NATURAL RESOURCES LLC Phone: (303) 2848820  
Address: 1875 LAWRENCE ST STE 1150 Fax: ( )  
City: DENVER State: CO Zip: 80202 Email: mackenzie.smith@enrllc.com

Complete the Attachment  
Checklist

OP OGCC

API Number : 05- 071 07573 00 OGCC Facility ID Number: 262849  
Well/Facility Name: LORENCITO Well/Facility Number: 5-7-34-66  
Location QtrQtr: SWNW Section: 7 Township: 34S Range: 66W Meridian: 6  
County: LAS ANIMAS Field Name: PURGATOIRE RIVER  
Federal, Indian or State Lease Number: \_\_\_\_\_

Survey Plat		
Directional Survey		
Srvc 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	
1754	FNL	1180	FWL

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

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Current **Surface** Location **From** QtrQtr SWNW Sec 7

Twp 34S Range 66W Meridian 6

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

Twp  Range  Meridian

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

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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

Twp  Range

New **Top of Productive Zone** Location **To** Sec

Twp  Range

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

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

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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 \_\_\_\_\_

**CHANGE OR ADD OBJECTIVE FORMATION AND/OR SPACING UNIT**

<u>Objective Formation</u>	<u>Formation Code</u>	<u>Spacing Order Number</u>	<u>Unit Acreage</u>	<u>Unit Configuration</u>

**OTHER CHANGES**

☐ **REMOVE FROM SURFACE BOND** Signed surface use agreement is a required attachment

☐ **CHANGE OF WELL, FACILITY OR OIL & GAS LOCATION NAME OR NUMBER**

From: Name LORENCITO Number 5-7-34-66 Effective Date: \_\_\_\_\_

To: Name \_\_\_\_\_ Number \_\_\_\_\_

☐ **ABANDON PERMIT: Permit can only be abandoned if the permitted operation has NOT been conducted. Field inspection will be conducted to verify site status.**

☐ WELL: Abandon Application for Permit-to-Drill (Form2) – Well API Number \_\_\_\_\_ has not been drilled.

☐ PIT: Abandon Earthen Pit Permit (Form 15) – COGCC Pit Facility ID Number \_\_\_\_\_ has not been constructed (Permitted and constructed pit requires closure per Rule 905)

☐ CENTRALIZED E&P WASTE MANAGEMENT FACILITY: Abandon Centralized E&P Waste Management Facility Permit (Form 28) – Facility ID Number \_\_\_\_\_ has not been constructed (Constructed facility requires closure per Rule 908)

OIL & GAS LOCATION ID Number: \_\_\_\_\_

☐ Abandon Oil & Gas Location Assessment (Form 2A) – Location has not been constructed and site will not be used in the future.

☐ Keep Oil & Gas Location Assessment (Form 2A) active until expiration date. This site will be used in the future.

**Surface disturbance from Oil and Gas Operations must be reclaimed per Rule 1003 and Rule 1004.**

☐ **REQUEST FOR CONFIDENTIAL STATUS**

☐ **DIGITAL WELL LOG UPLOAD**

☐ **DOCUMENTS SUBMITTED** Purpose of Submission: \_\_\_\_\_

**RECLAMATION****INTERIM RECLAMATION**

☐ Interim Reclamation will commence approximately \_\_\_\_\_

Per Rule 1003.e.(3) operator shall submit Sundry Notice reporting interim reclamation is complete and site is ready for inspection when vegetation reaches 80% coverage.

☐ Interim reclamation complete, site ready for inspection.

Per Rule 1003.e(3) describe interim reclamation procedure in Comments below or provide as an attachment and attach required location photographs.

**Field inspection will be conducted to document Rule 1003.e. compliance**

**FINAL RECLAMATION**

☐ Final Reclamation will commence approximately \_\_\_\_\_

Per Rule 1004.c.(4) operator shall submit Sundry Notice reporting final reclamation is complete and site is ready for inspection when vegetation reaches 80% coverage.

☐ Final reclamation complete, site ready for inspection. Per Rule 1004.c(4) describe final reclamation procedure in Comments below or provide as an attachment.

**Field inspection will be conducted to document Rule 1004.c. compliance**

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 05/06/2021

☐ 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 checked="" 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 type="checkbox"/> Other _____                                 |   |  |

**COMMENTS:**

Evergreen intends to complete multiple zones in the Raton and/or Vermejo formations which are considered common supply. New and existing intervals will be perforated, fracture stimulated using 70Q N2 foam, low volumes of guar gel with breakers, and formation water with sand volumes of approximately 250,000 to 450,000 lbs of sand depending upon the number of feet of pay actually completed. If necessary small volumes of low concentration acid will be used to clean up the perforations. After stimulation and cleanup the well will be returned to production utilizing pumps. It is anticipated that the spent stimulation fluids will be recovered during flow back and production operations. Proposed new gross interval is between 622'-1908'. Water wells within ¼, ½, and 1-mile radius, wellhead elevations, water well elevations and exact distance to the well, found on the COGCC GIS Application, can be found on the attachment.  
COGCC: Per logs, closest coal top is at 622'. Changed top perf from 600' to 622'.

**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**

No BMP/COA Type	Description

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: Mackenzie Smith  
Title: Production Engineer Email: mackenzie.smith@enrllc.com Date: 4/8/2021

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

COGCC Approved: BURGER, CRAIG Date: 6/21/2021

**CONDITIONS OF APPROVAL, IF ANY:****Condition of Approval****COA Type****Description**

	<p>Conditions of Approval for recompletes in the Raton Basin</p> <p>1.Domestic Water Well Sampling - Prior to recompletion, collect baseline groundwater samples from two water wells within ½-mile radius of the oil/gas well to be re-completed. Comply with COGCC Rule 615 requirements regarding sample locations, analyses, dissolved methane, post completion sample frequency and reporting. Include tert-Butyl Alcohol (TBA) with the other required analytes with a reporting limit &lt;5µg/l. Use Form 43 - Sample Submittal Form to upload all laboratory analytical data.</p> <p>2.Collect a flowback sample and analyze for the constituents listed in Table 7-1 of the COGCC Model Sampling And Analysis Plan (Version 1, 5/1/13). In addition to BTEX, analyze the sample for a full list of Volatile Organic Constituents (VOCs) by EPA Method 8260B and Semi-Volatile Organic Constituents by EPA Method 8270. Include TBA in the analyte list for VOCs with a reporting limit &lt;5µg/l. After completion, the sample shall be collected within 48-hours of initial flowback. Use Form 43 - Sample Submittal Form to upload all laboratory analytical data within three months after collection of the samples.</p> <p>3.All flowback shall be placed in tanks or properly permitted and lined pits. No flowback shall be discharged to unlined pits.</p> <p>4.Operator shall ensure that all frac fluid is compliant with COGCC Rule 437.</p>
	<p>In the event that ground disturbance necessary to conduct operations extends beyond the current stabilized work area, Operator shall implement stormwater controls including engineering and administrative controls, to prevent offsite migration of sediment/contaminants.</p> <p>Operator shall inform all Building Unit Owners within 2,000 feet of the Oil and Gas Location, of the planned operations including, date, time and duration of the operations.</p> <p>Operator shall inform the Las Animas County LGD prior to commencing the planned operations. Include, locations, planned dates, working hours and duration of operations.</p>

2 COAs

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Engineer	<p>Bottom hole elevation of WWs: &lt;1/4 mi:none, 1/4-1/2 mi: none, 1/2-1 mi: (7435'-7202')+50= 283'</p> <p>Results: No WW's of concern for proposed recomplete.</p> <p>Per logs, closest coal top is at 622'. Changed top perf from 600' to 622'.</p>	06/04/2021

Total: 1 comment(s)

**Attachment List**

<b><u>Att Doc Num</u></b>	<b><u>Name</u></b>
402653109	SUNDRY NOTICE APPROVED-INT
402653126	OFFSET WELL EVALUATION
402725089	FORM 4 SUBMITTED

Total Attach: 3 Files