

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: 402760528			
Date Received:			

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: 100322 Contact Name Mosiah Montoya
 Name of Operator: NOBLE ENERGY INC Phone: (303) 228-4000
 Address: 1001 NOBLE ENERGY WAY Fax: ()
 City: HOUSTON State: TX Zip: 77070 Email: Denverregulatory@nblenergy.com

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 123 25351 00 OGCC Facility ID Number: 294422
 Well/Facility Name: FRANK CC Well/Facility Number: 7-19
 Location QtrQtr: SENW Section: 7 Township: 4N Range: 63W Meridian: 6
 County: WELD Field Name: WATTENBERG
 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
1500	FNL	1400	FWL

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

--	--	--	--

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

Twp <u>4N</u>	Range <u>63W</u>	Meridian <u>6</u>
---------------	------------------	-------------------

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

Twp _____	Range _____	Meridian _____
-----------	-------------	----------------

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 _____

Twp _____	Range _____
-----------	-------------

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

Twp _____	Range _____
-----------	-------------

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

--	--	--	--

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

			**
--	--	--	----

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 _____

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 02/08/2021 Has Production Equipment been removed from site? No

Mechanical Integrity Test (MIT) required if shut in longer than 2 years. Date of last MIT 02/18/2021

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 _____

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

COMMENTS:

Noble Energy respectfully requests continued TA status. The well is closed to the atmosphere via quartzpack set 6617'-7098' on 02/08/2021. The well is closed to the atmosphere and locked out and tagged out at the master valve. The well was completed in the Codell formation. This well was TA'd to run a MIT. Noble will return the well to production or P&A the well before the next MIT is due. Form 5A to change the status to TA was submitted on 02/23/2021 doc # 402602834. Successful MIT was performed on 02-18-2021 and was submitted on doc # 402715849. This well is tagged with a blue tag.

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:

--

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

Signed: _____ Print Name: Julie Webb

Title: Sr. Regulatory Analyst Email: julie.webb@chevron.com Date: _____

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

COGCC Approved: _____ Date: _____

CONDITIONS OF APPROVAL, IF ANY:

COA Type

Description

--	--

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
--	--	---------------------

Total: 0 comment(s)

Attachment List

Att Doc Num

Name

--	--

Total Attach: 0 Files