

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: <u>402749509</u>			
Date Received: <u>07/16/2021</u>			

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: 10110 Contact Name Linsey Jones
Name of Operator: GREAT WESTERN OPERATING COMPANY LLC Phone: (720) 595-2218
Address: 1001 17TH STREET #2000 Fax: ()
City: DENVER State: CO Zip: 80202 Email: Ljones@gwp.com

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 001 10496 00 OGCC Facility ID Number: 476865
Well/Facility Name: GUS LD Well/Facility Number: 34-375HN
Location QtrQtr: SENE Section: 21 Township: 1S Range: 67W Meridian: 6
County: ADAMS 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 39.953145 GPS Quality Value: 1.2 Type of GPS Quality Value: PDOP Measurement Date: 06/12/2018
Longitude -104.885946

LOCATION CHANGE (all measurements in Feet)

Well will be: HORIZONTAL (Vertical, Directional, Horizontal)

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

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

Current **Surface** Location **From** QtrQtr SENE Sec 21

New **Surface** Location **To** QtrQtr SENE Sec 21

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 22

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

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

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

Current **Bottomhole** Location Sec 34 Twp 1S

New **Bottomhole** Location Sec _____ Twp _____

Is location in High Density Area? _____

Distance, in feet, to nearest building 1246, public road: 1062, above ground utility: 431, railroad: 5280,

property line: 456, lease line: _____, well in same formation: _____

Ground Elevation 5124 feet Surface owner consultation date _____

FNL/FSL		FEL/FWL	
<u>1573</u>	<u>FNL</u>	<u>381</u>	<u>FEL</u>
<u>1633</u>	<u>FNL</u>	<u>456</u>	<u>FEL</u>
Twp <u>1S</u>	Range <u>67W</u>	Meridian <u>6</u>	
Twp <u>1S</u>	Range <u>67W</u>	Meridian <u>6</u>	
<u>2566</u>	<u>FSL</u>	<u>1480</u>	<u>FWL</u>
			**
Twp <u>1S</u>	Range <u>67W</u>		
Twp _____	Range _____		
<u>370</u>	<u>FSL</u>	<u>1500</u>	<u>FWL</u>
			**
Twp <u>1S</u>	Range <u>67W</u>	** attach deviated drilling plan	
Twp _____	Range _____		

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 GUS LD Number 34-375HN 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 07/16/2021

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

COMMENTS:

Proposed change in SHL, total depth, and casing/cementing plan

CASING PROGRAM

<u>Casing Type</u>	<u>Size of Hole</u>	<u>Size of Casing</u>	<u>Grade</u>	<u>Wt/Ft</u>	<u>Csg/Liner Top</u>	<u>Setting Depth</u>	<u>Sacks Cmt</u>	<u>Cmt Btm</u>	<u>Cmt Top</u>
SURF	13+1/2	9+5/8	J55	40	0	2000	844	2000	0
1ST	8+1/2	5+1/2	HCP110	20	0	21330	3124	21330	

POTENTIAL FLOW AND CONFINING FORMATIONS

<u>Zone Type</u>	<u>Formation /Hazard</u>	<u>Top M.D.</u>	<u>Top T.V.D.</u>	<u>Bottom M.D.</u>	<u>Bottom T.V.D.</u>	<u>TDS (mg/L)</u>	<u>Data Source</u>	<u>Comment</u>
Groundwater	Fox Hills	912	912	1187	1187	501-1000	USGS	USGS WSP 2302
Confining Layer	Pierre	1187	1187	1385	1385			
Groundwater	Upper Pierre Aquifer	1385	1385	2325	2325	501-1000	Other	COGCC Report, Paper 2141
Confining Layer	Pierre	2325	2325	4541	4518			
Hydrocarbon	Parkman	4541	4518	4640	4607			
Confining Layer	Pierre	4640	4607	4997	4918			
Hydrocarbon	Sussex	4997	4918	5197	5091			
Confining Layer	Pierre	5197	5091	5632	5468			
Hydrocarbon	Shannon	5632	5468	5758	5577			
Confining Layer	Pierre	5758	5577	7840	7379			
Confining Layer	Sharon Springs	7840	7379	7980	7493			
Hydrocarbon	Niobrara	7980	7493	21330	7755			The TVD of the deepest hydrocarbon zone is the bottom of the well and not the bottom of the formation. The formation is not planned to be exited.

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:

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Best Management Practices

No BMP/COA Type

Description

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Operator Comments:

This sundry is being submitted to change the surface hole location, total depth, and casing/cementing plan. Updated well location plat, deviated drilling plan, and directional data template are attached.

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

Signed: _____ Print Name: Linsey Jones
Title: Regulatory Analyst Email: Ljones@gwp.com Date: 7/16/2021

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

COGCC Approved: Jacobson, Eric Date: 9/9/2021

CONDITIONS OF APPROVAL, IF ANY:

Condition of Approval

COA Type

Description

	This Sundry Notice Form 4 authorizes changes in the drilling/casing/cementing program as shown on the Drilling Permit Form 2 and must be visibly posted with the permit during drilling.
1 COA	

General Comments

User Group	Comment	Comment Date
Permit	•Permitting review complete and task passed.	09/08/2021

Total: 1 comment(s)

Attachment List

Att Doc Num	Name
402749509	SUNDRY NOTICE APPROVED-LOC-SFTY-STBK-DRLG-CSG
402749916	WELL LOCATION PLAT
402749921	DEVIATED DRILLING PLAN
402749922	DIRECTIONAL DATA
402806090	FORM 4 SUBMITTED

Total Attach: 5 Files