

**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: 402801338			
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: 10633 Contact Name Kathy Denzer
 Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLC Phone: (720) 410-8519
 Address: 1801 CALIFORNIA STREET #2500 Fax: ()
 City: DENVER State: CO Zip: 80202 Email: RegulatoryState@crestonepr.com

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 123 50735 00 OGCC Facility ID Number: 470941
 Well/Facility Name: Warner Well/Facility Number: 2C-10H-E165
 Location QtrQtr: SWNW Section: 10 Township: 1N Range: 65W 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 40.067252 GPS Quality Value: 2.1 Type of GPS Quality Value: PDOP Measurement Date: 02/17/2020
 Longitude -104.658392

LOCATION CHANGE (all measurements in Feet)

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

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

2203	FNL	323	FWL
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Change of **Surface** Footage **To** Exterior Section Lines:

2203	FNL	313	FWL
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Current **Surface** Location **From** QtrQtr SWNW Sec 10

Twp <u>1N</u>	Range <u>65W</u>	Meridian <u>6</u>
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New **Surface** Location **To** QtrQtr SWNW Sec 10

Twp <u>1N</u>	Range <u>65W</u>	Meridian <u>6</u>
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Change of **Top of Productive Zone** Footage **From** Exterior Section Lines:

2180	FNL	745	FWL
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Change of **Top of Productive Zone** Footage **To** Exterior Section Lines:

2180	FNL	800	FWL	**
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Current **Top of Productive Zone** Location **From** Sec 10

Twp <u>1N</u>	Range <u>65W</u>
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New **Top of Productive Zone** Location **To** Sec 10

Twp <u>1N</u>	Range <u>65W</u>
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Change of **Bottomhole** Footage **From** Exterior Section Lines:

460	FNL	745	FWL
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Change of **Bottomhole** Footage **To** Exterior Section Lines:

460	FNL	800	FWL	**
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Current **Bottomhole** Location Sec 3 Twp 1N Range 65W

** attach deviated drilling plan

New **Bottomhole** Location Sec 3 Twp 1N Range 65W

Is location in High Density Area? No

Distance, in feet, to nearest building 525, public road: 1800, above ground utility: 321, railroad: 2196,
 property line: 313, lease line: 0, well in same formation: 400

Ground Elevation 4971 feet Surface owner consultation date 08/15/2018

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>
NIOBRARA	NBRR	GWA	240	T1N, R65W: SEC 3: W2W2; SEC 10: W2NW

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 WARNER Number 2C-10H-E165 Effective Date: 09/05/2021

To: Name Warner Number 2B-10H-E165

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 02/01/2022

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:

The surface hole, top of productive zone and bottom hole have moved slightly, resulting in a change to the MD and casing and cement 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>
CONDUCTOR	26	16	A53B	42.09	0	104	119	104	0
SURF	13+1/2	9+5/8	J55	40	0	2485	1282	2485	0
1ST	8+1/2	5+1/2	P110	40	0	14593	1943	14593	2485

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	Denver	0	0	296	296	1001-10000	Groundwater Atlas	USGS HA-650 (Robson & Romero, 1981)
Groundwater	Laramie	296	296	575	574	501-1000	Groundwater Atlas	USGS HA-650 (Robson & Romero, 1981)
Groundwater	Fox Hills	575	574	921	914	501-1000	Groundwater Atlas	USGS HA-650 (Robson & Romero, 1981)
Confining Layer	Pierre Formation	921	914	1138	1127			
Groundwater	Upper Pierre Aquifer	1138	1127	1954	1928	0-500	Electric Log Calculation	Olin 1 (05-123-09418)
Confining Layer	Base of Upper Pierre Aqui	1954	1928	4108	4044			
Hydrocarbon	Larimer	4108	4044	4451	4382			
Hydrocarbon	Sussex	4451	4382	5034	4957			
Hydrocarbon	Shannon	5034	4957	7095	6928			
Confining Layer	Sharon Springs	7095	6928	7166	6954			
Hydrocarbon	Niobrara	7166	6954	7566	7080			

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

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Operator Comments:

Distance from completed portion of the wellbore to nearest wellbore permitted or completed well in the same formation and within the unit was measured to the proposed Warner 2C-10H-E165 measured in 2-D.

Changes to the original approved Form 2 are: Well Name, Surface Hole, top of productive zone, bottom hole location, total depth, casing and cement program.

The target formation has changed from the Codell to the Niobrara.

This well was originally permitted and approved under GWA spacing. Per COGCC direction, since the horizontal wellbore is remaining within the original Wellbore Spacing Unit, a Sundry Form 4 was used to capture the changes.

This location has been built.

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

Signed: _____ Print Name: Andrea Gross

Title: Permit Agent Email: agross@upstreampm.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

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General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)

Attachment List

Att Doc Num

Name

402802121	WELL LOCATION PLAT
402802124	DEVIATED DRILLING PLAN
402802127	DIRECTIONAL DATA

Total Attach: 3 Files