FORM 4
Rev 11/20

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

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Date Received: 09/13/2021

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: 69175 Contact Name: Jenifer Hakkarinen
Name of Operator: PDC ENERGY INC Phone: (303) 8605800
Address: 1775 SHERMAN STREET - STE 3000 Fax: ( )
City: DENVER State: CO Zip: 80203 Email: JEnifer.Hakkarinen@pdce.com

Complete the Attachment Checklist

	OP	OGCC
Survey Plat		
Directional Survey		
Srfc Eqpmt Diagram		
Technical Info Page		
Other		

API Number : 05- 123 48834 00 OGCC Facility ID Number: 459359
Well/Facility Name: Pharaoh Well/Facility Number: 5N
Location QtrQtr: NESE Section: 36 Township: 5N Range: 64W Meridian: 6
County: WELD Field Name: WATTENBERG
Federal, Indian or State Lease Number: 00/7325-S

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)

	FNL/FSL		FEL/FWL	
Change of **Surface** Footage **From** Exterior Section Lines:	1653	FSL	456	FEL
Change of **Surface** Footage **To** Exterior Section Lines:				

Current **Surface** Location **From**	QtrQtr	NESE	Sec	36	Twp	5N	Range	64W	Meridian 6
New **Surface** Location **To**	QtrQtr		Sec		Twp		Range		Meridian

	FNL/FSL		FEL/FWL		
Change of **Top of Productive Zone** Footage **From** Exterior Section Lines:	375	FSL	825	FEL	
Change of **Top of Productive Zone** Footage **To** Exterior Section Lines:					**

Current **Top of Productive Zone** Location **From**	Sec	36	Twp	5N	Range	64W
New **Top of Productive Zone** Location **To**	Sec		Twp		Range	

	FNL/FSL		FEL/FWL		
Change of **Bottomhole** Footage **From** Exterior Section Lines:	375	FSL	50	FWL	
Change of **Bottomhole** Footage **To** Exterior Section Lines:					**

Current **Bottomhole** Location	Sec	35	Twp	5N	Range	64W
New **Bottomhole** Location	Sec		Twp		Range	

** attach deviated drilling plan

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

Objective Formation	Formation Code	Spacing Order Number	Unit Acreage	Unit Configuration

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 PHARAOH Number 5N 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 09/27/2021

☐ 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:

Proposed Procedure:
1. MIRU WO unit & associated WO equipment, ND wellhead, NU BOP, tally all pipe to be ran in well.
2. RU wireline company. RIH w/ gauge ring and csg scraper to 6800’ (top of target marker joint collar @ 6010’)
3. TIH w/ composite BP and set @ 6750’, 62.9°. Load well, test csg to 5000 psi and verify integrity. Top with2 sxs 15.8#/gal Cl G cement.
4. TIH w/ composite BP and set @ 6220’.
5. TIH w/ composite BP and set @ 6160’.
6. TIH with perf gun and perforate squeeze holes from 6138’-6150’.
7. TIH with tubing to 6150’. Establish injection rate and modify nanosealant volumes based on injection test results.
8. RU SLB cementing company. Pump 10 bbls Nanosealant down tubing from 5700’-6150’.
9. PU tubing to 5600’. Shut in 5-1/2” casing valve and squeeze away 6 bbls through perforations. Hesitation squeeze remaining 4 bbls in ¼-bbl increments every 15 min.

10. TIH and mill out remaining squeeze sealant from 5700’ to 6150’ and CBP @ 6160’. TOOH.
11. RU wireline company. Run csg scraper from 6210’-5700’.
12. Run CBL from 6200’ to surface.
13. RU coil company. RIH with 75’ casing patch and set from 6105’-6180’.
14. Load well, test csg to 9500 psi and verify integrity.
15. RU wireline company and make gauge ring run from 6200’ to 6100’.
16. TIH and millout CBP at 6220’ and dump bail and CBP at 6750’. TOOH.
17. RDMO.

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: Jenifer Hakkarinen

Title: reg tech Email: JEnifer.Hakkarinen@pdce.com Date: 9/13/2021

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

COGCC Approved: Hix, James Date: 9/16/2021

CONDITIONS OF APPROVAL, IF ANY:

Condition of Approval

COA Type	Description
	Operator will implement measures to capture, combust, or control emissions to protect health and safety, and to ensure that vapors and odors from subsequnet well operations do not constitute a nuisance or hazard to public health, welfare and the environment. Due to proximity of BUs all blowdown gases will be controlled.
	1) Repaired casing must be pressure tested for a minimum of 30 minutes and to a minimum of 500 psi greater than the maximum surface pressure anticipated to be imposed during the Stimulation. Record pressure test in tabular form and provide a copy of this data to COGCC within 10 days of the repair work being completed. 2) After repair work is completed, a bradenhead test shall be performed and bradenhead samples collected if pressure is greater than 25 psi for laboratory analysis. The Form 17 shall be submitted within 10 days of the test. Copies of all final laboratory analytical results shall be provided to the COGCC within three months of collecting the samples in an approved electronic data deliverable format. 3) Operator shall not proceed with stimulation until COGCC engineering provides final approval. COGCC engineering will review repair documentation and the post-repair bradenhead test prior to making final determination.
2 COAs	

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)

Attachment List

Att Doc Num	Name
402808411	SUNDRY NOTICE APPROVED
402808416	BRADENHEAD PLAN
402814044	FORM 4 SUBMITTED

Total Attach: 3 Files