

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
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DE	ET	OE	ES
Document Number: <u>402886381</u>			
Date Received: <u>12/06/2021</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: <u>10651</u>	Contact Name <u>Heather Mitchell</u>
Name of Operator: <u>VERDAD RESOURCES LLC</u>	Phone: <u>(720) 845-6917</u>
Address: <u>1125 17TH STREET SUITE 550</u>	Fax: <u>()</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>regulatory@verdadresources.com</u>

FORM 4 SUBMITTED FOR:

Facility Type: WELL

API Number : 05- 123 51173 00 ID Number: 477674

Name: County Line Number: 3107-08H

Location QtrQtr: SWSE Section: 31 Township: 1N Range: 65W Meridian: 6

County: WELD Field Name: WATTENBERG

Oil & Gas Location(s) and Oil & Gas Development Plan (OGDP) Information

Location(s)

Location ID	Location Name and Number
474767	County Line Pad

OGDP(s)

No OGDP

WELL LOCATION CHANGE OR AS-BUILT GPS REPORT

☒ Change of Location for Well * ☐ As-Built GPS Location Report ☐ As-Built GPS Location Report with Survey

* Well Location Change requires a new Plat.

SURFACE LOCATION GPS DATA Data must be provided for Change of Surface Location and As Built Reports.

Latitude _____ Longitude _____

GPS Quality Value: _____ Type of GPS Quality Value: _____ Measurement Date: _____

Well Ground Elevation: _____ feet (Required for change of Surface Location.)

WELL LOCATION CHANGE

Well plan is: HORIZONTAL (Vertical, Directional, Horizontal)

Change of **Surface** Footage **From:**

Change of **Surface** Footage **To:**

Current Surface Location From	QtrQtr <u>SWSE</u>	Sec <u>31</u>	Twp <u>1N</u>	Range <u>65W</u>	Meridian <u>6</u>
New Surface Location To	QtrQtr	Sec	Twp	Range	Meridian

Change of **Top of Productive Zone** Footage **From:**

Change of **Top of Productive Zone** Footage **To:**

Current Top of Productive Zone Location	Sec <u>6</u>	Twp <u>1S</u>	Range <u>65W</u>
New Top of Productive Zone Location	Sec	Twp	Range

FNL/FSL		FEL/FWL	
<u>340</u>	<u>FSL</u>	<u>1985</u>	<u>FEL</u>
<u>460</u>	<u>FNL</u>	<u>2027</u>	<u>FWL</u>

**

Change of **Base of Productive Zone** Footage **From:**

Change of **Base of Productive Zone** Footage **To:**

Current **Base of Productive Zone** Location

Sec

Twp

Range

New **Base of Productive Zone** Location

Sec

Twp

Range

Change of **Bottomhole** Footage **From:**

Change of **Bottomhole** Footage **To:**

Current **Bottomhole** Location

Sec

Twp

Range

** attach deviated drilling plan

New **Bottomhole** Location

Sec

Twp

Range

SAFETY SETBACK INFORMATION

Required for change of Surface Location.

Distance from Well to nearest:

Building: Feet
Building Unit: Feet
Public Road: Feet
Above Ground Utility: Feet
Railroad: Feet
Property Line: Feet

INSTRUCTIONS:

- Specify all distances per Rule 308.b.(1).
- Enter 5280 for distance greater than 1 mile.
- Building - nearest building of any type. If nearest Building is a Building Unit, enter same distance for both.
- Building Unit – as defined in 100 Series Rules.

SUBSURFACE MINERAL SETBACKS

Required for change of Top and/or Base of Productive Zone. Enter 5280 for distance greater than 1 mile.

Is this Well within a unit?

If YES:

Enter the minimum distance from the Completed Zone of this Well to the Unit Boundary: Feet

Enter the minimum distance from the Completed Zone of this Well to the Completed Zone of an offset Well within the same unit permitted or completed in the same formation: Feet

If NO:

Enter the minimum distance from the Completed Zone of this Well to the Lease Line of the described lease: Feet

Enter the minimum distance from the Completed Zone of this Well to the Completed Zone of an offset Well producing from the same lease and permitted or completed in the same formation: Feet

Exception Location

☐ If this Well requires the approval of a Rule 401.c Exception Location, enter the Rule or spacing order number and attach the Exception Location Request and Waivers.

LOCATION CHANGE COMMENTS

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>	<u>Add</u>	<u>Modify</u>	<u>No Change</u>	<u>Delete</u>
CODELL	CODL	407-2957	2560	30-31E2 6-7ALL1-12E2			X	

OTHER

RULE 502 VARIANCE

Order Number: _____

Description:	
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REMOVE FROM SURFACE BOND Signed surface use agreement is a required attachment

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

From: Name COUNTY LINE Number 3107-08H 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 911)

☐ 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 907)

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 WELL RECORDS CONFIDENTIALITY (Rule 206.c.(1))

DIGITAL WELL LOG UPLOAD

DOCUMENTS SUBMITTED Purpose of Submission:

COMPLIANCE with CONDITION OF APPROVAL (COA) on Form NO: Document Number:

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, as required by Rule 434.b.(3).

Date well temporarily abandoned _____

Has Production Equipment been removed from site? _____

Mechanical Integrity Test (MIT) required. Date of last MIT _____

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/REQUEST FOR APPROVAL Approximate Start Date 12/03/2021

☐ SUBSEQUENT REPORT Date of Activity _____

- ☐ Bradenhead Plan
- ☐ Venting or Flaring (Rule 903)
- ☐ E&P Waste Mangement
- ☒ Change Drilling Plan
- ☐ Repair Well
- ☐ Beneficial Reuse of E&P Waste
- ☐ Gross Interval Change
- ☐ Underground Injection Control
- ☐ Request approval of Reuse and Recycling Plan per Rule 905.a.(3). (Reuse and Recycling Plan must be attached.)
- ☐ Request approval of Alternative Sampling Plan per Rule 909.j.(6). for this Pit. (Alternative Sampling Program must be attached.)
- ☐ Other

☐ Request that an existing produced water sample from the same formation be used per Rule 909.j.(6) to meet the requirements of Rule 909.j.(1)-(5) for this Well.

Pit ID _____ Pit Name _____

(No Sample Provided)

☐ Subsequent well operations with heavy equipment (Rule 312)

(No Well Provided)

COMMENTS:

CASING PROGRAM

Casing Type	Size of Hole	Size of Casing	Grade	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
CONDUCTOR	26	16	ASTM	65	0	80	70	80	0
SURF	13+1/2	9+5/8	J55	36	0	1786	810	1786	0
1ST	8+1/2	5+1/2	P110	20	0	17400	2181	17400	0

POTENTIAL FLOW AND CONFINING FORMATIONS

Zone Type	Formation /Hazard	Top M.D.	Top T.V.D.	Bottom M.D.	Bottom T.V.D.	TDS (mg/L)	Data Source	Comment
Groundwater	Denver	0	0	969	966	0-500	USGS	USGS- 400012104431601, USGS-395958104433101

Groundwater	Fox Hills	969	966	1264	1251	501-1000	USGS	USGS-400138104404301
Confining Layer	Pierre	1264	1251	1764	1719			
Groundwater	Upper Porosity Pierre	1764	1719	2306	2223	>10000	Other	No data available
Confining Layer	Pierre	2306	2223	4600	4355			
Hydrocarbon	Parkman	4600	4355	4875	4610			
Confining Layer	Pierre	4875	4610	4936	4667			
Hydrocarbon	Sussex	4936	4667	5205	4917			
Confining Layer	Pierre	5205	4917	7466	7018			
Hydrocarbon	Sharon Springs	7466	7018	7538	7083			
Hydrocarbon	Niobrara	7538	7083	8132	7470			
Hydrocarbon	Fort Hays	8132	7470	8201	7489			
Hydrocarbon	Codell	8201	7489	17400	7543			

H2S REPORTING

☐ Intentional release of H2S gas due to Upset Condition or malfunction.

☐ Intent to temporarily abandon well with potential H2S concentration >100 ppm.

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:

OIL & GAS LOCATION UPDATES

OGDP ID _____ OGDP Name _____

SITE EQUIPMENT LIST UPDATES

Indicate the number and type of major equipment components planned for use on this Oil and Gas Location:

Wells _____	Oil Tanks _____	Condensate Tanks _____	Water Tanks _____	Buried Produced Water Vaults _____
Drilling Pits _____	Production Pits _____	Special Purpose Pits _____	Multi-Well Pits _____	Modular Large Volume Tank _____
Pump Jacks _____	Separators _____	Injection Pumps _____	Heater-Treaters _____	Gas Compressors _____
Gas or Diesel Motors _____	Electric Motors _____	Electric Generators _____	Fuel Tanks _____	LACT Unit _____
Dehydrator Units _____	Vapor Recovery Unit _____	VOC Combustor _____	Flare _____	Enclosed Combustion Devices _____
Meter/Sales Building _____	Pigging Station _____	Vapor Recovery Towers _____		

OTHER PERMANENT EQUIPMENT UPDATES

OTHER TEMPORARY EQUIPMENT UPDATES

CULTURAL AND SAFETY SETBACK UPDATES

OTHER LOCATION CHANGES AND UPDATES

Provide a description of other changes or updates to technical information for this Location:

POTENTIAL OGDG UPDATES

PROPOSED CHANGES TO AN APPROVED OGDG

☐ This Sundry Form 4 is being submitted pursuant to Rule 301.c to propose changes to an approved Oil and Gas Development Plan.

Check all boxes that pertain to the type(s) of changes being proposed for this OGDG:

- | | |
|--|--|
| <input type="checkbox"/> Add Oil and Gas Location(s) | <input type="checkbox"/> Add Drilling and Spacing Unit(s) |
| <input type="checkbox"/> Amend Oil and Gas Location(s) | <input type="checkbox"/> Amend Drilling and Spacing Unit(s) |
| <input type="checkbox"/> Remove Oil and Gas Location(s) | <input type="checkbox"/> Remove Drilling and Spacing Unit(s) |
| <input type="checkbox"/> Oil and Gas Location attachment or plan updates | <input type="checkbox"/> Amend the lands subject to the OGDG |
| <input type="checkbox"/> Other | |

Provide a detailed description of the changes being proposed for this OGDG. Attach supporting documentation such as maps if necessary.

Best Management Practices

No BMP/COA Type

Description

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Operator Comments:

Change the BHL and add BPZ. The drilling plans have been updated to show this change. The surface on this well has been set.

This well has a bottom hole location beyond the unit boundary setback. The bottom of the completed interval will be within the unit boundary setback 460' FSL and 1978' FWL of section 7. The wellbore beyond the unit boundary setback will be physically isolated and will not be completed.

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

Signed: _____ Print Name: Heather Mitchell

Title: Regulatory Manager Email: regulatory@verdadresources.com Date: 12/6/2021

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

COGCC Approved: Haverkamp, Curtis

Date: 12/16/2021

CONDITIONS OF APPROVAL, IF ANY:

Condition of Approval

COA Type

Description

	Operator acknowledges the proximity of the listed non-operated wells. Operator assures that this offset list will be remediated per the Horizontal Offset Policy (option 4). Operator will submit a Form 42 ("OFFSET MITIGATION COMPLETED") stating that appropriate mitigation will be completed, during the hydraulic stimulation of this well. This Form 42 shall be filed 48 hours prior to stimulation. Operator will ensure the wellbore has a 5,000 psi wellhead, avoid stimulation with 1500' of the offset well, and monitor casing (surface and production) pressures during the entire stimulation treatment. Putnam #41-18 (001-06783)
	COGCC COA: Operator will ensure the wellbore beyond the unit boundary setback is physically isolated and is not completed. In the Operator Comments on the Form 5A the operator will (1) report the footages from the section lines of the bottom of the completed interval (2) describe how the wellbore beyond the unit boundary setback is physically isolated and (3) certify that none of the wellbore beyond the setback was completed.

2 COAs

General Comments

User Group

Comment

Comment Date

Permit	Added the drilling beyond the setback COA with the operator consent Passed Permit Review	12/07/2021
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Total: 1 comment(s)

Attachment List

Att Doc Num

Name

402886381	SUNDRY NOTICE APPROVED-LOC-MNRL-STBK-OBJ-DRLG-CSG
402886392	WELL LOCATION PLAT
402886393	DEVIATED DRILLING PLAN
402886397	DIRECTIONAL DATA
402901339	FORM 4 SUBMITTED

Total Attach: 5 Files