

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: 402956554			
Date Received: 02/15/2022			

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>16700</u>	Contact Name <u>RYAN O'DELL</u>
Name of Operator: <u>CHEVRON USA INC</u>	Phone: <u>(972) 695-3384</u>
Address: <u>760 HORIZON DRIVE STE 401</u>	Fax: <u>()</u>
City: <u>GRAND JUNCTION</u> State: <u>CO</u> Zip: <u>81506</u>	Email: <u>rodell@scoutep.com</u>

FORM 4 SUBMITTED FOR:

Facility Type: WELL

API Number : 05- 103 05796 00 ID Number: 228810

Name: GRAY Number: B-15

Location QtrQtr: NESE Section: 13 Township: 2N Range: 103W Meridian: 6

County: RIO BLANCO Field Name: RANGELY

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

Location(s)

Location ID	Location Name and Number
311797	GRAY-62N103W 13NESE

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: _____ (Vertical, Directional, Horizontal)

Change of Surface Footage From:		FNL/FSL	FEL/FWL
Change of Surface Footage To:			
Current Surface Location From	QtrQtr <u>NESE</u> Sec <u>13</u>	Twp <u>2N</u> Range <u>103W</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 _____	Twp _____	Range _____
New Top of Productive Zone Location	Sec _____	Twp _____	Range _____

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>
WEBER	WEBR	0	0				X	

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 01/27/2022
 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:

Bradenhead diagnostic evaluation. The bradenhead has been monitored since 1/27/21. During this diagnostic evaluation period the bradenhead was blown down two times (3/22/21 & 11/24/21). During this same diagnostic evaluation period there were no improvements seen on the bradenhead pressures until after this well was brought back on production on 12/2/21. Before then the pressures had stayed between 745-985 psi. Scout will plumb the surface casing of this producer into its own production flowline as is seen on the attached diagram by 5/27/22. This will maintain the pressure below the 219 psi threshold in the event the well is shut-in, as flowline pressure ranges from ~80-145 psi.

CASING PROGRAM

(No Casing Provided)

POTENTIAL FLOW AND CONFINING FORMATIONS

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:

[Empty text box for other location changes and updates]

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:

- Add Oil and Gas Location(s)
- Add Drilling and Spacing Unit(s)
- Amend Oil and Gas Location(s)
- Amend Drilling and Spacing Unit(s)
- Remove Oil and Gas Location(s)
- Remove Drilling and Spacing Unit(s)
- Oil and Gas Location attachment or plan updates
- Amend the lands subject to the OGDG
- Other

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

[Empty text box for detailed description of changes]

Best Management Practices

No BMP/COA Type

Description

No BMP/COA Type	Description

Operator Comments:

[Empty text box for 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: ANITA SANFORD

Title: Regulatory Analyst Email: anita.sanford@scoutep.com Date: 2/15/2022

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

COGCC Approved: Katz, Aaron Date: 2/17/2022

CONDITIONS OF APPROVAL, IF ANY:

Condition of Approval

COA Type

Description

Make sure they put in a valve to monitor/sample flow from the bradenhead,
Tied to sales Outside BHTA:
1) Operator shall comply with COGCC Rule 419. Bradenhead Monitoring, Testing, and Reporting and Rule 420. Form 17, Bradenhead Test Report
2) At least once a year shut in bradenhead for 7 days or until the pressure reaches the bradenhead threshold and perform a bradenhead test. Report results on a Form 17, as specified in Rule 420 or other Director approved submittal method.
3) Comply with any CDPHE, Air Pollution Control Division rules or requirements for all atmospheric discharges.
4) Any liquids blown down are to be collected, stored, handled, and treated or disposed as E&P waste per COGCC's 900 series rules.
5) At least one check valve is required for annular spaces that are tied to sales line or separator. Maintain equipment for pressure regulation and check valves in good working order.
6) At least one valve is required to monitor pressure and sample flow from the bradenhead.
7) Within 30 days of completing the work, submit a Form 4 Subsequent Report - Bradenhead Plan

1 COA

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineer	Surface casing TVD 730 ft. X .3 psi/ft= 219 psi BH threshold	02/17/2022

Total: 1 comment(s)

Attachment List

<u>Att Doc Num</u>	<u>Name</u>
402956554	SUNDRY NOTICE APPROVED-OBJ
402956560	LAYOUT DRAWINGS
402956561	WELLBORE DIAGRAM
402958858	FORM 4 SUBMITTED

Total Attach: 4 Files