

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>402892221</u> | | | |
| Date Received: <u>12/08/2021</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: 74165 Contact Name Edward Ingve
 Name of Operator: RENEGADE OIL & GAS COMPANY LLC Phone: (303) 829-2354
 Address: 6155 S MAIN STREET #225 Fax: ()
 City: AURORA State: CO Zip: 80016 Email: ed@renegadeoilandgas.com

FORM 4 SUBMITTED FOR:

Facility Type: WELL

API Number : 05- 039 06587 00 ID Number: 209682

Name: MYERS 21-3 Number: 3

Location QtrQtr: NENW Section: 3 Township: 6S Range: 63W Meridian: 6

County: ELBERT Field Name: PEAK VIEW

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

Location(s)

| Location ID | Location Name and Number |
|-------------|--------------------------|
| 322203 | MYERS 21-3-66S63W 3NENW |

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)

| | | | | | | | |
|--|--|------------------------------------|-------------------------------------|--|---|-----------------------------------|----------------------------------|
| | | | | FNL/FSL | | FEL/FWL | |
| Change of Surface Footage From: | | | | <input type="text" value="640"/> | <input type="text" value="FNL"/> | <input type="text" value="1980"/> | <input type="text" value="FWL"/> |
| Change of Surface Footage To: | | | | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Current Surface Location From | QtrQtr <input type="text" value="NENW"/> | Sec <input type="text" value="3"/> | Twp <input type="text" value="6S"/> | Range <input type="text" value="63W"/> | Meridian <input type="text" value="6"/> | | |
| New Surface Location To | QtrQtr <input type="text"/> | Sec <input type="text"/> | Twp <input type="text"/> | Range <input type="text"/> | Meridian <input type="text"/> | | |
| Change of Top of Productive Zone Footage From: | | | | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Change of Top of Productive Zone Footage To: | | | | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Current Top of Productive Zone Location | | Sec <input type="text"/> | Twp <input type="text"/> | Range <input type="text"/> | | | |
| New Top of Productive Zone Location | | Sec <input type="text"/> | Twp <input type="text"/> | Range <input type="text"/> | | | |

**

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> |
|----------------------------|-----------------------|-----------------------------|---------------------|---------------------------|------------|---------------|------------------|---------------|
| D SAND | DSND | 0 | 40 | NENW | | | X | |

Comments:

[Empty box for 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 _____
 SUBSEQUENT REPORT Date of Activity 12/06/2021

| | | |
|---|--|--|
| <input type="checkbox"/> Bradenhead Plan | <input type="checkbox"/> Venting or Flaring (Rule 903) | <input type="checkbox"/> E&P Waste Mangement |
| <input 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"/> Underground Injection Control | | |
| <input type="checkbox"/> Request approval of Reuse and Recycling Plan per Rule 905.a.(3). (Reuse and Recycling Plan must be attached.) | | |
| <input type="checkbox"/> Request approval of Alternative Sampling Plan per Rule 909.j.(6). for this Pit. (Alternative Sampling Program must be attached.) | | |
| <input checked="" type="checkbox"/> Other Alternative MIT | | |

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:

Renegade requests approval of alternative MIT for the #3 Myers 21-3 as allowed for by Rule 326.b(3) after Director consideration of any equivalent test or combination of tests.
Renegade believes the #3 Myers 21-3 demonstrates mechanical integrity due to a 12/18/2020 bradenhead test (Doc #402562623) performed showing no bradenhead pressure and tubing /casing pressure of 2/60 psi coupled with a 12/6/2021 bradenhead test (Doc #402890675) conducted showing no bradenhead pressure and tubing/casing pressure of 2/17 psi. The #3 Myers 21-3 was completed with surface casing down to 406' and a DV tool at 1680' and cemented with 150 sacks of cement. If the well lacked integrity old drilling mud would kill the well shutting off any formation entry. Well pressures including the bradenhead will be monitored monthly to ensure integrity.
This well is SI as a result of the Third Creek Gas Gathering System shutdown on 6/1/2018 and was producing at the time of SI. The #3 Myers 21-3 was produced utilizing plunger lift equipment.

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]

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]

Best Management Practices

No BMP/COA Type

Description

| No BMP/COA Type | Description |
|-----------------|-------------|
| | |

Operator Comments:

This Form 4 is being filed for the #3 Myers 21-3 in response to a need for an alternative MIT approval to satisfy a COGCC rule to conduct MITs on wells SI longer than two years. Other Renegade wells with similar circumstances have had Form 4's previously approved. Conversations with COGCC staff coupled with the well's circumstances has led to the belief that this filing is ripe for approval.

This well is subject to a Warning Letter (Doc #402818337) issued 9/23/2021.

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

Signed: _____ Print Name: Edward Ingve
 Title: Manager/Owner Email: ed@renegadeoilandgas.com Date: 12/8/2021

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: 4/20/2022

CONDITIONS OF APPROVAL, IF ANY:

Condition of Approval

COA Type

Description

| | |
|-------|--|
| 1 COA | If well is not producing by December 06, 2023, an official MIT will need to be done. |
|-------|--|

General Comments

User Group

Comment

Comment Date

| | | |
|--|--|---------------------|
| | | Stamp Upon Approval |
|--|--|---------------------|

Total: 0 comment(s)

Attachment List

| <u>Att Doc Num</u> | <u>Name</u> |
|---------------------------|----------------------------------|
| 402892221 | SUNDRY NOTICE APPROVED-OBJ-OTHER |
| 403021662 | FORM 4 SUBMITTED |
| Total Attach: 2 Files | |