

**State of Colorado
Oil and Gas Conservation Commission**

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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>52530</u>	Contact Name <u>Jody Kost</u>
Name of Operator: <u>MAGPIE OPERATING INC</u>	Phone: <u>(970) 6696308</u>
Address: <u>2707 SOUTH COUNTY RD 11</u>	Fax: <u>()</u>
City: <u>LOVELAND</u> State: <u>CO</u> Zip: <u>80537</u>	Email: <u>magpieoil2@yahoo.com</u>

FORM 4 SUBMITTED FOR:

Facility Type: WELL

API Number : 05- 107 05048 00 ID Number: 232482

Name: RICHFIELD-WIRICK-FEDERAL Number: 1

Location QtrQtr: SESE Section: 14 Township: 5N Range: 88W Meridian: 6

County: ROUTT Field Name: SAGE CREEK NORTH

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

Location(s)

Location ID	Location Name and Number
316739	RICHFIELD-WIRICK-FEDERAL-65N88W 14SESE

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 :		1080	FSL	359	FEL
Change of Surface Footage To :		[]	[]	[]	[]
Current Surface Location From	QtrQtr <u>SESE</u>	Sec <u>14</u>	Twp <u>5N</u>	Range <u>88W</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

Objective Formation	Formation Code	Spacing Order Number	Unit Acreage	Unit Configuration	Add	Modify	No Change	Delete
NIOBRARA	NBRR	0	40	SESE			X	

Comments:

[Empty comment box]

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 03/31/2022

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:

This well is not connected to a sales line. The well does not produce enough gas to warrant construction of gas gathering system. All gas produced by the well used to run equipment at the shared production facility or at the well head.

GAS CAPTURE

VENTING AND FLARING:

Operation type: Flaring Operational phase requiring venting/flaring: Production

Reason for venting/flaring: Gathering Line Not Accessible

Describe Other reason for venting/flaring:

The RICHFIELD-WIRICK-FEDERAL 1 location is neither venting nor flaring gas, all gas is used on site and any residual gas is routed to an approved combustion device after separation.

Describe why venting or flaring is necessary. If reporting per Rule 903.b.(2), 903.c.(3).C, or 903.d.(2), include the explanation, rationale, and cause of the event:

This location is not connected to a gathering system. MAGPIE OPERATING INC is first utilizing the produced natural gas to run production equipment onsite. Natural gas production is

minimal and often is not enough to run the equipment on site which requires the use of supplemental propane to keep equipment operating. A combustor is installed at the existing Richfield-Wirick-Federal location, where all products from this well is piped, to allow for flexibility in case gas is encountered during production. MAGPIE OPERATING INC., RICHFIELD-WIRICK-FEDERAL 1's produced gas is processed through a combustor located in the process stream after separation has occurred. Combustion of tank vapor after adequate separation is authorized by CDPHE-APCD. This location has an APEN with CDPHE, AIRS ID 107-0127-001. An APEN Modification has been submitted with CDPHE, Permit #21RO0906.

Describe how the operation will protect and minimize adverse impacts to public health, safety, welfare, the environment, and wildlife resources. If reporting per Rule 903.d.(2), include BMPs used to minimize venting on the BMP Tab:

The RICHFIELD-WIRICK-FEDERAL 1 produces insufficient saleable quantity or quality gas to make such a long lateral pipeline to connect to a gas gathering system feasible or practicable. The nearest gas gathering line is approximately 1 mile away. Natural gas is utilized onsite to run production equipment. It is not vented.

Total volume of gas vented or flared: 16 mcf estimated measured
Total duration of emission event: 24 hours consecutive cumulative

Submit a single representative gas analysis via Form 43 to create a Sample Site Facility ID# for this Location. Reference the Form 43 document number on the Related Forms tab.

Sample Site Facility ID#: _____

GAS CAPTURE PLAN

Describe the plan to connect to a gathering line or beneficially use the gas; include anticipated timeline:

For the reasons stated above, connection to a gathering line is not feasible. The minimal natural gas produced is beneficially used onsite to run production equipment.

A Gas Capture Plan that meets the requirements of Rule 903.e is attached.

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:

POTENTIAL OGDP UPDATES

PROPOSED CHANGES TO AN APPROVED OGDP

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 OGDP:

- | | |
|--|--|
| <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 OGDP |
| <input type="checkbox"/> Other | |

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

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: Jessica Donahue

Title: Compliance Specialist Email: jdonahue@ardorenvironmental.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:

<u>COA Type</u>	<u>Description</u>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)

Attachment List

<u>Att Doc Num</u>	<u>Name</u>
402925911	GAS ANALYSIS REPORT
403042034	GAS CAPTURE PLAN

Total Attach: 2 Files