

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: 403107251 | | | |
| Date Received: 07/15/2022 | | | |

SUNDRY NOTICE

This form is required for reports, updates, and requests as specified in the COGCC rules. It is also used to request changes to some aspects of approved permits for Wells and Oil and Gas Locations.

| | |
|--|--------------------------------------|
| OGCC Operator Number: <u>95620</u> | Contact Name <u>Drezden Kinnaird</u> |
| Name of Operator: <u>WESTERN OPERATING COMPANY</u> | Phone: <u>(970) 4937780</u> |
| Address: <u>1165 DELAWARE STREET #200</u> | Fax: <u>()</u> |
| City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80204</u> | Email: <u>dkinnaird@cgrs.com</u> |

FORM 4 SUBMITTED FOR:

Facility Type: LOCATION

API Number : 05- 075 00 ID Number: 388633

Name: REIKE C-69N54W Number: 2SESE

Location QtrQtr: SESE Section: 2 Township: 9N Range: 54W Meridian: 6

County: LOGAN Field Name: CEDAR CREEK NORTH

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

Location(s)

| Location ID | Location Name and Number |
|-------------|--------------------------|
| 388633 | REIKE C-69N54W 2SESE |

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="663"/> | <input type="text" value="FSL"/> | <input type="text" value="660"/> | <input type="text" value="FEL"/> |
| 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="SESE"/> | Sec <input type="text" value="2"/> | Twp <input type="text" value="9N"/> | Range <input type="text" value="54W"/> | 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

Comments:

ENGINEERING AND ENVIRONMENTAL WORK

REPORT OF TEMPORARY ABANDONMENT

Describe the method used to ensure that the Well is closed to the atmosphere and the Operator's plans for future operation of the Well in the COMMENTS box below as required by Rule 434.b.(1).

REQUEST FOR TEMPORARY ABANDONMENT EXCEEDING 6 MONTHS

State the reason for the extension request and explain the Operator's plans for future operation of the Well 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 07/06/2022

| | | |
|---|--|--|
| <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 909j compliance status update | | |

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:

A produced water sample was collected by CGRS from the Rieke C facility on 7/6/2022 and submitted to ALS Laboratory for analysis within 24 hours of sampling. Sampling at this facility was delayed due to the additional time required to incorporate methods from the Model Produced Water Sampling and Analysis Plan into the sampling and analysis plan for this facility. Additional time was also required to schedule appropriate personnel for scientific data collection, secure equipment rental, coordinate with capable laboratories in accordance with the plan, work through supply chain issues, and to coordinate/schedule sample collections within the same geographic area to greatly reduce the number of miles driven when sampling in remote locations. Analytical results are expected from the laboratory within 2-5 weeks. The results will be uploaded via Form 43 as soon as possible and no later than 10 business days after the data is received from the laboratory.
Should you have any questions, please feel free to contact me via email at dkinnaird@cgrs.com

GAS CAPTURE

VENTING AND FLARING:

Operation type: _____ Operational phase requiring venting/flaring: _____

Reason for venting/flaring: _____

Describe Other reason for venting/flaring:

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:

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:

Total volume of gas vented or flared: _____ mcf estimated measured

Total duration of emission event: _____ 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:

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

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:

[Empty text box for 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 location changes]

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:

- 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 OGDP
- Other

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

[Empty text box for proposed changes description]

Best Management Practices

No BMP/COA Type

Description

| 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: Drezden Kinnaird
Title: Project Manager Email: dkinnaird@cgrs.com Date: 7/15/2022

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

COGCC Approved: KOEPSSELL, ARTHUR Date: 8/2/2022

CONDITIONS OF APPROVAL, IF ANY:

Condition of Approval

COA Type

Description

| | |
|--|---|
| | The Sundry Notice has been approved and posted to COGIS. Approval of this Sundry Notice does not grant an extension or variance to Rule 909. j allowing the operator to submit the required produced water analytical sample data later than July 15, 2022. That requirement is now past-due. |
|--|---|

1 COA

General Comments

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

Total: 0 comment(s)

Attachment List

Att Doc Num

Name

| | |
|-----------|------------------------------|
| 403107251 | SUNDRY NOTICE APPROVED-OTHER |
| 403123523 | FORM 4 SUBMITTED |

Total Attach: 2 Files