

Oil and Gas Conservation Commission

DEPARTMENT OF NATURAL RESOURCES

SUNDRY NOTICE

This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (back of this form).

ETD OE PR ES

Complete the

Attachment Checklist

Oper OGCC

1. OGCC Operator Number: 9110
2. Name of Operator: Union Pacific Resources Company
3. Address: P. O. Box 7 MS 3006
City: Fort Worth State: Texas Zip: 76101-0007
4. Contact Name & Phone: Mary Curliss Patton
No. (817) 877-7958
FAX (817) 877-7942

5. API Number: 05-123-8649
6. OGCC Lease No: 01266
7. Well Name: CPC 41-14 Number: 1
8. Location (QtrQtr, Sec, Twp, Rng, Meridian): NENE Sec. 14, T-1N, R-68W
9. County: Weld 10. Field Name: Spindle
11. Federal, Indian or State lease number: NA

Survey Plat
Directional Survey
Surface Equipment Diagram
Technical Information Page
Other

12. General Notice

☐ Change well name from _____ to _____ Effective Date: _____
☐ Change location from _____ to _____
Attach new survey plat.
☐ Abandoned Location. Is site ready for inspection? ☐ Yes ☐ No Effective Date: _____
Was location ever built? ☐ Yes ☐ No Permit No: _____
☒ Well first shut in or temporarily abandoned Sept. 22, 1997 ☐ Notice of continued shut-in status.
Has production equipment been removed from site? ☐ Yes ☒ No
MIT required if shut in longer than two years. Date of last MIT: _____
☐ Well resumed production on _____
☐ Request for Confidential Status (6 months)
☐ Final reclamation will commence approximately on _____
☐ Final reclamation is completed and site is ready for inspection. Attach technical page describing final reclamation procedures per Rule 1000c.4.
☐ Change of Operator (prior to drill). Effective Date: _____ Plugging bond: ☐ Blanket
☐ Individual
☐ Spud Date _____

13. Technical Engineering/Environmental Notice

☐ Notice of Intent Approximate Start Date: _____
☐ Report of Work Done Date Work Completed: _____

Details of work must be described in full on Technical Information Page (Page 2 must be submitted).

<input type="checkbox"/> Commingled Zones <input type="checkbox"/> Intent to Recomplete (Submit Form 2) <input type="checkbox"/> Change Drilling Plans <input type="checkbox"/> Reservoir Stimulation <input type="checkbox"/> Perforating/Perfs Added Gross Interval Changed? <input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Request to Vent or Flare <input type="checkbox"/> Repair Well <input type="checkbox"/> Convert Well to Injection (in an Approved Secondary Project) <input type="checkbox"/> Additional Source Leases for Water Disposal Well <input type="checkbox"/> Other: _____	<input type="checkbox"/> E&P Waste Disposal <input type="checkbox"/> Beneficial Reuse of E&P Waste <input type="checkbox"/> New Pit <input type="checkbox"/> Landfarming <input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases
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I hereby certify that the statements made in this form are, to the best of my knowledge, true and correct, and complete.

Print Name Mary Curliss Patton

Signed Mary Curliss Patton Title: Regulatory Analyst II Date: 10/10/97

OGCC Approved: [Signature] Title: _____ Date: 10/24/97

CONDITIONS OF APPROVAL, IF ANY: