

**State of Colorado**  
**Energy & Carbon Management Commission**

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DE	ET	OE	ES
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**SUNDRY NOTICE**

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

ECMC Operator Number: <u>100322</u>	Contact Name <u>Randy Thweatt</u>
Name of Operator: <u>NOBLE ENERGY INC</u>	Phone: <u>(303) 228-4000</u>
Address: <u>1099 18TH STREET SUITE 1500</u>	Fax: <u>( )</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>denverregulatory@chevron.onmicrosoft.com</u>

**FORM 4 SUBMITTED FOR:**

Facility Type: WELL  
 API Number : 05- 123 48782 00 ID Number: 459215  
 Name: Pioneer Number: Y18-744  
 Location QtrQtr: NWNE Section: 7 Township: 2N Range: 64W Meridian: 6  
 County: WELD Field Name: WATTENBERG

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

**Location(s)**

Location ID	Location Name and Number
459203	Y07-02 Pad

**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**:

Change of **Surface** Footage **To**:

Current <b>Surface</b> Location <b>From</b>	QtrQtr <u>NWNE</u>	Sec <u>7</u>	Twp <u>2N</u>	Range <u>64W</u>	Meridian <u>6</u>
New <b>Surface</b> Location <b>To</b>	QtrQtr <u>  </u>	Sec <u>  </u>	Twp <u>  </u>	Range <u>  </u>	Meridian <u>  </u>

FNL/FSL		FEL/FWL	
<u>658</u>	<u>FNL</u>	<u>2240</u>	<u>FEL</u>
<u>  </u>	<u>  </u>	<u>  </u>	<u>  </u>

Change of **Top of Productive Zone** Footage **From:**

200 FNL

2213 FEL

Change of **Top of Productive Zone** Footage **To:**

\*\*

Current **Top of Productive Zone** Location

Sec 7

Twp 2N

Range 64W

New **Top of Productive Zone** Location

Sec

Twp

Range

Change of **Base of Productive Zone** Footage **From:**

FNL

FEL

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:**

200 FSL

2231 FEL

Change of **Bottomhole** Footage **To:**

\*\*

Current **Bottomhole** Location

Sec 18

Twp 2N

Range 64W

\*\* 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>	Add	Modify	No Change	Delete
NIOBRARA	NBRR	407-2671	1280	7&18: All			X	

**OTHER**

**RULE 502 VARIANCE**

Order Number: \_\_\_\_\_

Description:

**REMOVE FROM SURFACE BOND**      **Signed surface use agreement is a required attachment**

**CHANGE NAME OR NUMBER OF WELL, FACILITY, OIL & GAS LOCATION, OR OGD**

From: Name PIONEER Number Y18-744 Effective Date: \_\_\_\_\_  
 To: Name \_\_\_\_\_ Number \_\_\_\_\_

**ABANDON PERMIT: Permit can only be abandoned if the permitted operation has NOT been conducted. Field inspection will be conducted to verify site status.**

- WELL: Abandon Application for Permit-to-Drill (Form2) – Well API Number \_\_\_\_\_ has not been drilled.
- PIT: Abandon Earthen Pit Permit (Form 15) – ECMC Pit Facility ID Number \_\_\_\_\_ has not been constructed (Permitted and constructed pit requires closure per Rule 911)

**CENTRALIZED E&P WASTE MANAGEMENT FACILITY:** Abandon Centralized E&P Waste Management Facility Permit (Form 28) – Facility ID Number \_\_\_\_\_ has not been constructed (Constructed facility requires closure per Rule 907)

OIL & GAS LOCATION ID Number: \_\_\_\_\_

- Abandon Oil & Gas Location Assessment (Form 2A) – Location has not been constructed and site will not be used in the future.
- Keep Oil & Gas Location Assessment (Form 2A) active until expiration date. This site will be used in the future.

**Surface disturbance from Oil and Gas Operations must be reclaimed per Rule 1003 and Rule 1004.**

**REQUEST FOR WELL RECORDS CONFIDENTIALITY (Rule 206.c.(1))**

**DIGITAL WELL LOG UPLOAD**

**DOCUMENTS SUBMITTED**      Purpose of Submission: Frac Pressure Blanket Procedure

**COMPLIANCE with CONDITION OF APPROVAL (COA) on** Form NO: \_\_\_\_\_ Document Number: \_\_\_\_\_

**RECLAMATION**

**INTERIM RECLAMATION**

- Interim Reclamation will commence approximately \_\_\_\_\_  
 Per Rule 1003.e.(3) operator shall submit Sundry Notice reporting interim reclamation is complete and site is ready for inspection when vegetation reaches 80% coverage.
- Interim reclamation complete, site ready for inspection.  
 Per Rule 1003.e(3) describe interim reclamation procedure in Comments below or provide as an attachment and attach required location photographs.

**Field inspection will be conducted to document Rule 1003.e. compliance**

**FINAL RECLAMATION**

- Final Reclamation will commence approximately \_\_\_\_\_  
 Per Rule 1004.c.(4) operator shall submit Sundry Notice reporting final reclamation is complete and site is ready for inspection when vegetation reaches 80% coverage.

Final reclamation complete, site ready for inspection. Per Rule 1004.c(4) describe final reclamation procedure in Comments below or provide as an attachment.

**Field inspection will be conducted to document Rule 1004.c. compliance**

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      04/25/2024

SUBSEQUENT REPORT      Date of Activity \_\_\_\_\_

<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    Frac Pressure Blanket NOI		

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:

Noble Energy respectfully requests approval for off-set frac mitigation. The frac pressure blanket procedure is attached.

Wells Fracing

- Pioneer Y18-756 (05-123-48785)
- Pioneer Y18-766 (05-123-48768)
- Pioneer Y18-775 (05-123-48775)
- Pioneer Y18-785 (05-123-48783)

Equipment on Location - See Fig 2. for Layout

- 8 frac tanks
- Piping manifold for frac tanks (water storage)
- 1 chemical trailer treating freshwater w/ biocide to prevent bacterial fouling
- 1 Booster truck
- 2 Pump trucks (1 for backup)
- Piping on discharge side of the pump truck
- 1 Frac tank for flow back

Volume, Pressure and Rate Consideration

Total freshwater volume 48,000-67,000 bbls target; 100,000 bbls permitted  
 Pumping rate 0.5-5 bbls/min  
 Max pressure at surface 3,000 psi (safety kill switch setup on pump and PSV do not allow pressure to exceed 3000 psi)  
 Frac gradient in the area is around 1.00 psi/ft  
 Maximum bottomhole pressure = 6,024 psi. ~3,000 psi at surface and 3,024 psi hydrostatic assuming no friction. Maximum gradient is 0.86 psi/ft which is below frac gradient.

Initial pressure on Wellhead

Tubing = 471 psi and Casing = 800 psi

Timing

Pumping operation will continue no longer than 4 weeks (but approximate dates are 4/21/24-5/8/24). Frac will start on approximately 4/25/24.

Procedure:

1. Rig up equipment on location (frac tank, flowback tank, biocide, pumps, piping)
2. Shut-in casing and open tubing.
3. Start pumping at 1 bbl/min through tubing (recording pressure, rate and volume)
4. If the pressure stays below 3000 psi after an hour, bump rate to 2-5 bbls/min (MAX RATE 5 BBLs/MIN AND PRESSURE 3000PSI)
5. Pump all water away (24 hour operation). Monitor Pressure on offset wells.
6. Shut well in after all volume pumped.
7. RDMO
8. Once offset well is finished fracing, bring well back online normally or by using green flowback

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.

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

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

[Empty text box for OGDG description]

**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: Kim Bauer

Title: Regulatory Analyst II Email: kimberlybauer@chevron.com Date: 3/28/2024

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

ECMC Approved: JENKINS, STEVE Date: 4/22/2024

**CONDITIONS OF APPROVAL, IF ANY LIST**

**COA Type**

**Description**

Prior to start of the subsequent operations, operator shall send courtesy notifications to all Residential Building Unit owners/tenants within 2,000 feet of the location informing them of impending operations, the anticipated timeframe in which the operations will occur, and operator contact information if they have questions.

1 COA

**General Comments**

**User Group**

**Comment**

**Comment Date**

Stamp Upon  
Approval

Total: 0 comment(s)

**ATTACHMENT LIST**

**Att Doc Num**

**Name**

403735250      SUNDRY NOTICE APPROVED-OBJ-SBSQ-OPS-OTHER-DOC

403735271      PRESSURE BLANKET PROCESS

403763017      FORM 4 SUBMITTED

Total Attach: 3 Files