

State of Colorado  
Energy & Carbon Management Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
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Document Number:

403339227

Date Received:

03/23/2023

## INJECTION WELL PERMIT APPLICATION

Submit a completed Form 33 with or after approval obtained on Form 31 (Underground Injection Formation Permit Application) or you must have a previously approved injection Well Permit.

1. Operator may not commence injection into this well until this form is approved.
2. Each individual injection well must be approved by this form.

Per Rule 803, this form shall be submitted with all required attachments.

A Form 33 – Intent shall be submitted and approved prior to completing an injection zone.

A Form 33 – Subsequent shall be submitted following completion of the well and must be approved prior to injection.

NOTE: Injection for Enhanced Recovery requires the field to be unitized according to Rule 811.

Form 33 Type ☒ Intent ☐ Subsequent**OPERATOR INFORMATION**

ECMC Operator Number: 96850	Contact Name and Telephone:
Name of Operator: TEP ROCKY MOUNTAIN LLC	Name: Jeff Kirtland
Address: 1058 COUNTY ROAD 215	Phone: (970) 263-2736 Fax: ( )
City: PARACHUTE State: CO Zip: 81635	Email: jkirtland@terraep.com

**WELL INFORMATION**

Well Name and Number: Federal RG	943-24-299D	API No: 05-103-12675-00
Field Name and Number: SULPHUR CREEK	80090	County: RIO BLANCO
QtrQtr: SENW	Sec: 24	Twp: 2S
Range: 99W	Meridian: 6	

**UIC FACILITY INFORMATION**

UIC Facility ID: 160040 (as assigned on an approved Form 31)

Facility Name: Federal RG 943-24-299D Facility Number:

**WELLBORE INFORMATION**

(No Casing Provided)

Plug Back Total Depth: 9773 Tubing Depth: 5670 Packer Depth: 5672

List below all Plugs, Bridge Plugs, Stage Cementing or Squeeze Work from Surface to TD performed on this wellbore.

Describe below any changes to the wellbore which will be made upon conversion (includes but not limited to changes of tubing and packer setting depths, any additional squeeze work for aquifer protection or casing leaks, setting of bridge plugs to isolate non-injection formations).

**WELLBORE COMPLETIONS**

Formation Name	Gross Completed Interval from Top	Gross Completed Interval from Bottom	Completion Type
ILES	8773	9773	Perforated
WILLIAMS FORK	5722	7265	Perforated

Operator Comments:

TEP has submitted a Form 2 (Doc# 403339233) for the proposed Federal RG 943-24-299D well and a Form 2A (Doc# 403320102) for the Federal RG 22-24-299 Oil and Gas Location, in addition to this Form 33 and the Form 31 (Doc# 403339208) submission. TEP has also submitted an Oil and Gas Development application, which has been assigned Docket No. 230300080.

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

Print Name: Scott Ghan

Signed: \_\_\_\_\_ Title: Sr. Regulatory Specialist Date: 3/23/2023 3:56:52 PM

ECMC Approved:  \_\_\_\_\_ Title: \_\_\_\_\_ Date: 5/8/2024 2:36:00 PM

MAX. SURFACE INJECTION PRESSURE: \_\_\_\_\_ If Disposal Well, MAX. INJECTION VOL. LIMIT: \_\_\_\_\_

**CONDITIONS OF APPROVAL, IF ANY LIST**

<b>COA Type</b>	<b>Description</b>
Underground Injection Control	Well must pass MIT witnessed by ECMC before Subsequent Forms 31 and 33 will be approved. Well must be in injection configuration.
Underground Injection Control	Operator must provide all tops of formations encountered from surface to TD on a Form 5 (if one is needed) or on a Sundry.
Underground Injection Control	For all new and converted Underground Injection Control wells a Cement Bond Log (CBL) is required on the cased portions of the hole from the bottom of the casing to the top of the next shallower casing string for all casing strings other than the Surface Casing and Conductor if present. Only a PDF, TIFF, or PDS visual image is required.
Underground Injection Control	For ALL NEW DRILL UNDERGROUND INJECTION WELLS a suite of open-hole Resistivity/Gamma Ray and Density/Neutron logs IS REQUIRED from Surface Casing shoe to TD. A PDF, TIFF, or PDS visual image and a LAS or DLIS file version of each log is required.
4 COAs	

**ATTACHMENT LIST**

<b>Att Doc Num</b>	<b>Name</b>
403339227	FORM 33-INTENT-SUBMITTED
403351365	OTHER
403351368	WELLBORE DIAGRAM-PROPOSED

Total Attach: 3 Files

**General Comments**

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

Total: 0 comment(s)