

State of Colorado
Energy & Carbon Management Commission

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DE	ET	OE	ES
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Date Received: <u>10/30/2024</u>			

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>10669</u>	Contact Name	<u>Venessa Chase</u>
Name of Operator:	<u>NICKEL ROAD OPERATING LLC</u>	Phone:	<u>(303) 907-1714</u>
Address:	<u>3773 CHERRY CRK NORTH DR #670</u>	Fax:	<u>()</u>
City:	<u>DENVER</u>	State:	<u>CO</u>
Zip:	<u>80209</u>	Email:	<u>vc@prairieopco.com</u>

FORM 4 SUBMITTED FOR:

Facility Type: WELL

API Number : 05- 123 51572 00 ID Number: 479796

Name: Rusch Number: 16W4CM

Location QtrQtr: NESE Section: 3 Township: 7N Range: 65W Meridian: 6

County: WELD Field Name: WATTENBERG

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

Location ID	Location Name and Number
479158	RUSCH 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 40.600287 Longitude -104.641435

GPS Quality Value: 1.4 Type of GPS Quality Value: PDOP Measurement Date: 11/07/2017

Well Ground Elevation: 4886 feet (Required for change of Surface Location.)

WELL LOCATION CHANGE

Well plan is: HORIZONTAL (Vertical, Directional, Horizontal)

Change of **Surface** Footage **From**:

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

Current Surface Location From	QtrQtr	<u>NESE</u>	Sec	<u>3</u>	Twp	<u>7N</u>	Range	<u>65W</u>	Meridian	<u>6</u>
New Surface Location To	QtrQtr	<u>NESE</u>	Sec	<u>3</u>	Twp	<u>7N</u>	Range	<u>65W</u>	Meridian	<u>6</u>

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

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

Current Top of Productive Zone Location	Sec	<u>3</u>	Twp	<u>7N</u>	Range	<u>65W</u>
New Top of Productive Zone Location	Sec	<u>3</u>	Twp	<u>7N</u>	Range	<u>65W</u>

FNL/FSL		FEL/FWL	
<u>1731</u>	<u>FSL</u>	<u>527</u>	<u>FEL</u>
<u>1730</u>	<u>FSL</u>	<u>587</u>	<u>FEL</u>
<u>460</u>	<u>FSL</u>	<u>460</u>	<u>FEL</u>
<u>300</u>	<u>FSL</u>	<u>150</u>	<u>FEL</u>
**			

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

460 FSL

460 FEL

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

300 FSL

150 FWL

**

Current **Base of Productive Zone** Location

Sec 4

Twp 7N

Range 65W

New **Base of Productive Zone** Location

Sec 4

Twp 7N

Range 65W

Change of **Bottomhole** Footage **From:**

460 FSL

150 FWL

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

300 FSL

150 FWL

**

Current **Bottomhole** Location

Sec 4

Twp 7N

Range 65W

** attach deviated drilling plan

New **Bottomhole** Location

Sec 4

Twp 7N

Range 65W

SAFETY SETBACK INFORMATION

Required for change of Surface Location.

Distance from Well to nearest:

Building: 931 Feet
Building Unit: 962 Feet
Public Road: 581 Feet
Above Ground Utility: 565 Feet
Railroad: 5280 Feet
Property Line: 587 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? Yes

If YES:

Enter the minimum distance from the Completed Zone of this Well to the Unit Boundary: 150 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: 194 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

Distance to the nearest well within the same unit was measured to the Rusch 8X-HNB-04-07-65 (05-123-50620) via AC Report attached.

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
CODELL	CODL	407-3653	1280	S.3:ALL; S.4:ALL				X
NIOBRARA	NBRR	407-3653	1280	T7N R65W SEC.3&4: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 OGDFrom: Name RUSCH Number 16W4CM Effective Date: 10/30/2024To: Name Rusch Number 15W4CM☐ 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: _____☐ 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 12/15/2024

☐ **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 checked="" 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 type="checkbox"/> 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:

Well Name, Surface, Entry Point and Bottom hole footages, casing and cementing plans, and the DSU order number have been modified for the subject well. There are no changes to the offset well evaluation.

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

<u>Casing Type</u>	<u>Size of Hole</u>	<u>Size of Casing</u>	<u>Grade</u>	<u>Wt/Ft</u>	<u>Csg/Liner Top</u>	<u>Setting Depth</u>	<u>Sacks Cmt</u>	<u>Cmt Btm</u>	<u>Cmt Top</u>
CONDUCTOR	26	16	A52A	36.94	0	40	170	40	0
SURF	13+1/2	9+5/8	J55	36	0	1825	805	1825	0
1ST	8+1/2	5+1/2	EPP110	20	0	17975	2852	17975	1000

POTENTIAL FLOW AND CONFINING FORMATIONS

<u>Zone Type</u>	<u>Formation /Hazard</u>	<u>Top M.D.</u>	<u>Top T.V.D.</u>	<u>Bottom M.D.</u>	<u>Bottom T.V.D.</u>	<u>TDS (mg/L)</u>	<u>Data Source</u>	<u>Comment</u>
Groundwater	Fox Hills Sandstone	0	0	360	360	1001-10000	DWR	COGCC UPWQ Study
Confining Layer	Pierre Shale	360	360	1230	1230			
Groundwater	UPIR/Pawnee Aquifer	1230	1230	1700	1700	1001-10000	Other	COGCC UPWQ Study
Confining Layer	Pierre Shale	1700	1700	3938	3938			
Hydrocarbon	Parkman	3938	3938	4095	4095			
Confining Layer	Pierre Shale	4095	4095	4450	4450			
Hydrocarbon	Sussex	4450	4450	4720	4720			
Confining Layer	Pierre Shale	4720	4720	5211	5211			
Hydrocarbon	Shannon	5211	5211	5365	5365			
Confining Layer	Pierre Shale	5365	5365	7165	6952			
Subsurface Hazard	Sharon Springs Shale	7165	6952	7289	6960			
Hydrocarbon	Niobrara	7289	6960	7341	6991			
Confining Layer	Fort Hays	7341	6991	7735	7106			
Hydrocarbon	Codell	7735	7106	17975	7106			

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 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:

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

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

Best Management Practices

No BMP/COA Type

Description

1	Drilling/Completion Operations	Alternative Logging Program: One of the first wells drilled on the pad will be logged with open-hole resistivity log with gamma-ray log from the kick-off point into the surface casing. All wells on the pad will have a cement bond log with gamma-ray run on production casing (or on intermediate casing if production liner is run) into the surface casing. The horizontal portion of every well will be logged with a measuredwhile-drilling gamma-ray log. The Form 5, Completion Report, for each well on the pad will list all logs run and have those logs attached. The Form 5 for a well without openhole logs shall state "Alternative Logging Program - No open-hole logs were run", and shall clearly identify the type of log and the well (by API#) in which open-hole logs were run.
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Total: 1 comment(s)

Operator Comments:

Well Name, Surface, Entry Point and Bottom hole footages, casing and cementing plans, and the DSU order number have been modified for the subject well. There are no changes to the offset well evaluation.

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

Signed: _____ Print Name: Venessa Chase
Title: Manager of Reg Affairs Email: vc@prairieopco.com Date: 10/30/2024

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

ECMC Approved: Espino-Rodriguez, Eden Date: 11/14/2024

CONDITIONS OF APPROVAL, IF ANY LIST**COA Type****Description**

	Operator will log two (2) additional wells during the first rig occupation with open-hole resistivity log with gamma-ray log from the kick-off point into the surface casing for the stratigraphically deepest wells on each side of the pad for a total of three wells logged
1 COA	

General Comments**User Group****Comment****Comment Date**

Permit	-Added the location of the BPZ as per well location plat -Received consent from the operator for the following changes: 1.Adding the additional open hole logging COA 2.Adding the open hole logging BMP Passed Permit Review	11/13/2024
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Total: 1 comment(s)

ATTACHMENT LIST**Att Doc Num****Name**

403975343	SUNDRY NOTICE APPROVED-LOC-SFTY-STBK-MNRL-STBK-OBJ-NAME-DRLG-CSG
403975366	DIRECTIONAL DATA
403975368	DEVIATED DRILLING PLAN
403975370	WELL LOCATION PLAT
403994402	FORM 4 SUBMITTED

Total Attach: 5 Files