

State of Colorado
Energy & Carbon Management Commission

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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>16700</u>	Contact Name <u>Steve Vogel</u>
Name of Operator: <u>CHEVRON USA INC</u>	Phone: <u>(303) 828-8303</u>
Address: <u>760 HORIZON DRIVE STE 401</u>	Fax: <u>()</u>
City: <u>GRAND JUNCTION</u> State: <u>CO</u> Zip: <u>81506</u>	Email: <u>SVogel@chevron.com</u>

FORM 4 SUBMITTED FOR:

Facility Type: WELL
 API Number : 05-045 14393 00 ID Number: 291488
 Name: SKR Number: 598-35-AV-18
 Location QtrQtr: NWNE Section: 35 Township: 5S Range: 98W Meridian: 6
 County: GARFIELD Field Name: SKINNER RIDGE

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

Location(s)

Location ID	Location Name and Number
336045	SKR-65S98W 35NWNE

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 Surface Location From	QtrQtr <u>NWNE</u>	Sec <u>35</u>	Twp <u>5S</u>	Range <u>98W</u>	Meridian <u>6</u>
New Surface Location To	QtrQtr <u> </u>	Sec <u> </u>	Twp <u> </u>	Range <u> </u>	Meridian <u> </u>

FNL/FSL		FEL/FWL	
995	FNL	1449	FEL

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

1528 FNL

665 FEL

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

**

Current **Top of Productive Zone** Location

Sec 35

Twp 5S

Range 98W

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:**

1528 FNL

665 FEL

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

**

Current **Bottomhole** Location

Sec 35

Twp 5S

Range 98W

** 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

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 09/16/2024

SUBSEQUENT REPORT Date of Activity _____

<input checked="" 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 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:

A Form 17 was completed on the SKR-598-35-AV-18 (05-045-14393) on 7/22/2024 and submitted on 7/25/2024 (Doc ID 403865550). The Form 17 began at 201 psi and ended at 74 psi, with continuous gas flow. This well did not have a starting pressure above the bradenhead action threshold of 319 psi, but had continuous flow through the 30 minute test. Because of this, we would like to add this well to our Mitigation program. No liquid flow was observed. A bradenhead and production gas sample was collected on 07/22/2024. A Form 43 for the BH sample (Doc ID 403883775) was submitted and approved on 08/09/2024 and the production gas sample (Prod Doc ID 404065448) was submitted on 01/23/2025. The bradenhead gas sample appears to be thermogenic and had 90.5% methane and 2.3% ethane with a 3.4% wetness ratio, whereas the production gas sample had a wetness ratio of 5.65%. Isotopic ratios appear similar. Chevron proposes to tie the bradenhead into the flowline so pressure can bleed off through the facility. A check valve will be installed to prevent backflow from the flowline to the bradenhead. The bradenhead line will be continuously open to the flowline and all gas from the bradenhead will be captured and routed through the facility. Facility pressure generally ranges between 130 and 160psi. Pressure automation will be installed and bradenhead pressure will be continuously monitored. After 12 months, a new Form 17 test will be performed and a Form 4 subsequent submitted with a summary of mitigation actions and bradenhead pressure. Production cement top is at estimated at 1708', with excellent coverage below, as indicated by the RBL logged 3/29/2008. The log was run under 0 pressure, so a microannulus is not suspected.

In an effort to create consistency between the DJ Basin and the Western Slope, Chevron has switched to using 1/2" needle valves for performing Form 17s. This valve has a smaller diameter orifice than was previously used on the Chevron Western Slope wells' bradenheads, meaning there may be some instances of longer times in Form 17s for bradenhead flow to go to 0 or increased bradenhead pressure at the end of Form 17s despite no change in downhole condition or configuration with regard to bradenhead. We believe this valve change is the cause of the pressure observed at the end of the 7/22/24 Form 17 as compared to historical Form 17s. This is supported by the similar starting pressure (within 4 psi of each Form 17 performed since 2021).

As diagnostic testing, in order to determine whether there is communication between production casing and surface casing, Chevron performed a shut-in test of the tubing and casing (while bradenhead was also shut-in). There was no correlation between production casing and surface casing pressures, and surface casing pressure remained constant after bringing the well back online, indicating there is no casing integrity issue.

- We activated and opened the pressure transmitter on the bradenhead on December 19th and it immediately showed 201psi (+/1 1psi) for the duration of the trend). Any values before that will show NULL since we had not yet activated that tag.
- We shut the casing and tubing on December 19th. You can see the resulting pressure increases. NOTE: BH pressure remained constant at 201psi.
- Production was opened back up on January 19th. NOTE: bradenhead pressure remains constant at 201psi.

Attached are the original facility pressure plot, the shut-in casing/tubing pressure plot, and the CBL indicating production casing TOC at 1710'.

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 other location changes and 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)
- 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 OGDG
- Other

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

[Empty text box for detailed description of changes]

Operator Best Management Practices

No BMP/COA Type

Description

<u>No BMP/COA Type</u>	<u>Description</u>

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: Dawn Bittner

Title: Administrative Assistant Email: stephaniebittner@chevron.com Date: _____

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

ECMC Approved: _____ Date: _____

CONDITIONS OF APPROVAL, IF ANY LIST

COA Type

Description

<u>COA Type</u>	<u>Description</u>
0 COA	

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineer	Sent back to draft on 11/20 for details on continuous flow	11/20/2024
Total: 1 comment(s)		

ATTACHMENT LIST

<u>Att Doc Num</u>	<u>Name</u>
403922106	NET PRESSURE CHART
404068794	NET PRESSURE CHART
404068796	OTHER
Total Attach: 3 Files	