

State of Colorado
Energy & Carbon Management Commission

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Document Number: <u>404332040</u>			
Date Received:			

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: 10705 Contact Name Timothy Fernandez
 Name of Operator: EVERGREEN NATURAL RESOURCES LLC Phone: (719) 2204330
 Address: 1775 SHERMAN ST. #2775 Fax: ()
 City: DENVER State: CO Zip: 80203 Email: timothy.fernandez@enrllc.com

FORM 4 SUBMITTED FOR:

Facility Type: LOCATION
 API Number : 05- 071 00 ID Number: 334334
 Name: VECTOR-632S66W Number: 23NWSE
 Location QtrQtr: NWSE Section: 23 Township: 32S Range: 66W Meridian: 6
 County: LAS ANIMAS Field Name: PURGATOIRE RIVER

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

Location(s)

Location ID	Location Name and Number
334334	VECTOR-632S66W 23NWSE

OGDP(s)

No OGDP

GROUNDWATER SAMPLING

Uses of Groundwater Sampling Section

Request exceptions to current Groundwater sampling requirements in Rules 615.c and 907.b.(9) or to request exceptions to the requirements in previous Rules 318A.f and 609.

Request a previously sampled Water Source in the COGIS database be used to meet sampling requirements described in Rules 615.c.(3) and 907.b.(9).A or requirements in previous Rules 318A.f and 609.d.(3).

NOTE: If this Sundry Notice is being submitted to request a Groundwater Sampling Exception it cannot be used for any other purpose except requesting the use of a Previously Sampled Water Source in the COGIS database.

Request an Exception to Groundwater Sampling Requirements per previous Rule 318A.f: There are no Available Water Sources located within the governmental quarter section or within a previously unsampled governmental quarter section within a ½-mile radius of this proposed Oil and Gas Well, Multi-Well Site, or Dedicated Injection Well.

Request exceptions to current Groundwater sampling requirements in Rules 615.c and 907.b.(9) or previous Rule 609.c.

3 Number of Water Sources located within one-half mile of an oil or gas well or multi-well site (Rule 615.c) or within one (1) mile of a Centralized E&P Waste Management Facility (Rule 907.b.(9)).

1 Number of Water Source Exceptions requested per Rule 615.c or Rule 907.b.(9).

0 Number of Water Sources determined to be unsuitable. **The condition of these Water Sources MUST be documented in the comments below or in an attachment.**

0 Number of Water Sources suitable for testing whose owners refused to grant access despite an operator's reasonable good faith efforts to obtain consent to conduct sampling.

The reasonable good faith efforts used to obtain access from the owners of these Water Sources MUST be documented in the comments below or in an attachment.

Request a previously sampled Water Source in the COGIS database be used to meet sampling requirements as described in Rule 615.d.(3) and 907.b.(9) or as described in previous Rules 318A.f.(2).A and 609.d.(3).

_____ Type of Sample Substitution Request

Enter Sample ID Number from COGIS Maps for each Previous Water Sample:

Sample ID	Facility ID	Sample Date	Sample Purpose

COMMENTS

The following wells were not drilled, abandoned, and/or permit expired: #0445478.

Landowner was unable to meet on site and accommodate ENR for sampling for Receipt #9089383 and #0227872 prior to frac date due to being out of state. Both were sampled on 6/26/25 after the frac date.

Operator Comments:

This Form 4 is being filed in response to Doc#404186652 to update the ECMC on the status of two wells that were unable to be sampled prior to frac operations at the Vector 33-23 TR. Landowner for water well Receipt # 0227872 and #9089383 was unable to meet ENR personnel to conduct sampling at both sites due to being out of state. A sample was later collected on 6/26/2025. Results were submitted to the ECMC via Form 43 Doc# 404292110 and Doc#404292094.

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

Signed: _____ Print Name: Timothy Fernandez
 Title: Regulatory Supervisor Email: timothy.fernandez@enrllc.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

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

General Comments

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

Total: 0 comment(s)

ATTACHMENT LIST

<u>Att Doc Num</u>	<u>Name</u>

Total Attach: 0 Files