

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>10844</u>	Contact Name <u>Katie Biersmith</u>
Name of Operator: <u>QB ENERGY OPERATING LLC</u>	Phone: <u>(720) 547-8746</u>
Address: <u>1001 17TH STREET SUITE 1600</u>	Fax: ()
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>kbiersmith@qb-energy.com</u>

FORM 4 SUBMITTED FOR:

Facility Type: WELL

API Number : 05- 103 12690 00 ID Number: 486809

Name: RNPU B27 FED Number: 14C-22-197

Location QtrQtr: Lot 3 Section: 27 Township: 1S Range: 97W Meridian: 6

County: RIO BLANCO Field Name: PICEANCE CREEK

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

Location(s)

Location ID	Location Name and Number
485795	PCU FED B27-197

OGDP(s)

OGDP ID	OGDP Name
485279	RNPU PHASE 1

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 39.941158 Longitude -108.269231

GPS Quality Value: 1.6 Type of GPS Quality Value: PDOP Measurement Date: 09/12/2022

Well Ground Elevation: 6516 feet (Required for change of Surface Location.)

WELL LOCATION CHANGE

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

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

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

Current Surface Location From	QtrQtr	<u>Lot 3</u>	Sec	<u>27</u>	Twp	<u>1S</u>	Range	<u>97W</u>	Meridian	<u>6</u>
New Surface Location To	QtrQtr		Sec		Twp		Range		Meridian	

FNL/FSL		FEL/FWL	
<u>538</u>	<u>FNL</u>	<u>2425</u>	<u>FWL</u>

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

1940 FSL

1086 FWL

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

2422 FSL

1102 FWL

**

Current **Top of Productive Zone** Location

Sec 22

Twp 1S

Range 97W

New **Top of Productive Zone** Location

Sec 22

Twp 1S

Range 97W

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

FSL

FWL

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

2340 FSL

1044 FWL

**

Current **Base of Productive Zone** Location

Sec

Twp

Range

New **Base of Productive Zone** Location

Sec 22

Twp 1S

Range 97W

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

1858 FSL

1029 FWL

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

2340 FSL

1044 FWL

**

Current **Bottomhole** Location

Sec 22

Twp 1S

Range 97W

** attach deviated drilling plan

New **Bottomhole** Location

Sec 22

Twp 1S

Range 97W

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? Yes

If YES:

Enter the minimum distance from the Completed Zone of this Well to the Unit Boundary: 2340 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: 401 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

- Route to the Area Reclamation Specialist

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 08/29/2025

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:

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	30	20	H40	54	0	100	220	100	0
SURF	14+3/4	9+5/8	J55	36	0	2500	538	2500	500
1ST	8+3/4	4+1/2	HCP110	13.5	0	14008	1683	14008	
		9+5/8		Stage Tool		900	304	900	0

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	Uintah	0	0	2866	2653	501-1000	CGS	
Confining Layer	Wasatch	2866	2653	6158	5577			
Hydrocarbon	Wasatch G	6158	5577	6687	6047			The Wasatch G is a non-productive zone in the referenced area of basin.
Confining Layer	Fort Union	6687	6047	8315	7561			
Hydrocarbon	Ohio Creek	8315	7561	9065	8311	>10000	Produced Water Sample	
Hydrocarbon	Williams Fork	9065	8311	11961	11207	>10000	Produced Water Sample	
Hydrocarbon	Cameo	11961	11207	12511	11757	>10000	Produced Water Sample	
Hydrocarbon	Rollins	12511	11757	12607	11853	>10000	Produced Water Sample	The Rollins is a non-productive zone in the referenced area of basin.
Hydrocarbon	Cozzette	12607	11853	13207	12453	>10000	Produced Water Sample	
Hydrocarbon	Corcorran	13207	12454	14008	13253	>10000	Produced Water Sample	

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]

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]

Operator Best Management Practices

No BMP/COA Type

Description

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Operator Comments:

Submitting to reflect new BHL due to updated pad spacing. Distance to closest well is 401' to the RNPU B27 FED 14D-22 197 well.

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

Signed: _____ Print Name: Katie Biersmith
 Title: Sr. Regulatory Analyst Email: kbiersmith@qb-energy.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

0 COA	
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General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)

ATTACHMENT LIST

Att Doc Num

Name

404336685

DIRECTIONAL DATA

404336688

DEVIATED DRILLING PLAN

404336692

WELL LOCATION PLAT

Total Attach: 3 Files