

**State of Colorado**  
**Energy & Carbon Management Commission**

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DE	ET	OE	ES
Document Number: <u>404542692</u>			
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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>96850</u>	Contact Name <u>Jeff Kirtland</u>
Name of Operator: <u>TEP ROCKY MOUNTAIN LLC</u>	Phone: <u>(970) 293-1469</u>
Address: <u>1058 COUNTY ROAD 215</u>	Fax: ( )
City: <u>PARACHUTE</u> State: <u>CO</u> Zip: <u>81635</u>	Email: <u>jeff.kirtland@flywheelenergy.com</u>

**FORM 4 SUBMITTED FOR:**

Facility Type: WELL

API Number : 05- 103 10759 00 ID Number: 284727

Name: FEDERAL RGU Number: 14-16-198

Location QtrQtr: SWSW Section: 16 Township: 1S Range: 98W Meridian: 6

County: RIO BLANCO Field Name: SULPHUR CREEK

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

**Location(s)**

Location ID	Location Name and Number
316544	FEDERAL RGU-61S98W 16SWSW

**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)

				FNL/FSL		FEL/FWL				
Change of <b>Surface</b> Footage <b>From:</b>				828	FSL	659	FWL			
Change of <b>Surface</b> Footage <b>To:</b>										
Current <b>Surface</b> Location <b>From</b>	QtrQtr	<u>SWSW</u>	Sec	<u>16</u>	Twp	<u>1S</u>	Range	<u>98W</u>	Meridian	<u>6</u>
New <b>Surface</b> Location <b>To</b>	QtrQtr		Sec		Twp		Range		Meridian	
Change of <b>Top of Productive Zone</b> Footage <b>From:</b>										
Change of <b>Top of Productive Zone</b> Footage <b>To:</b>										**
Current <b>Top of Productive Zone</b> Location			Sec		Twp		Range			
New <b>Top of Productive Zone</b> Location			Sec		Twp		Range			

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

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:**

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

\*\*

Current **Bottomhole** Location

Sec

Twp

Range

\*\* 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 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**

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      05/01/2026

SUBSEQUENT REPORT      Date of Activity \_\_\_\_\_

Bradenhead Plan

Venting or Flaring (Rule 903)

E&P Waste Mangement

Change Drilling Plan

Repair Well

Beneficial Reuse of E&P Waste

Gross Interval Change

Underground Injection Control

Request approval of Reuse and Recycling Plan per Rule 905.a.(3). (Reuse and Recycling Plan must be attached.)

Request approval of Alternative Sampling Plan per Rule 909.j.(6). for this Pit. (Alternative Sampling Program must be attached.)

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:

TEP Rocky Mountain LLC (TEP) respectfully requests approval to repair casing subject well. Please find attached procedure and WBD. CPW Consult 03/05/2026. Please see attached.

Proposed Procedure:

- 1.MIRU Service rig, spot all equipment, kill well
- 2.ND Production tree, NU BOP's, Pressure test BOP's to 300 psi low, 4,000 psi high
- 3.POOH 2-3/8" J-55 tbg while scanning/inspecting, leaving final 10-15 jts of tbg in holefor tail string
- 4.RIH w/ 4-1/2" 11.6# csg pkr, set @ 500' and pressure test production csg to confirmcsg leak above packer
- 5.Leave well sit overnight to utilize gas pressure to test for a production casing leakbelow 500'
- 6.RIH with 4-1/2" TSBP and tail string using only YB tbg pulled from well. If necessaryPUMU YB, WB, or new tbg
- 7.Set BP at +/-4,500' (TOC 3,340'), POOH SB tbg
- 8.If csg leak is above surface csg shoe (shoe at 3,766'):
  - a.Mechanically cut casing +/-20' below leak depth if necessary to allow un-landing csg slips
  - b.POOH LD damaged csg
  - c.RIH w/ overshot and LHWS and latch onto production csg
  - d.Manually backoff production casing with string shot appx 1+ jt belowdamaged csg
  - e.POOH with casing and lay down
  - f.RIH with new casing and screw back into existing casing, fully torque (+/-2,650 ft-lbs)
  - g.Pull test +/-65k. Land in minimum tension (+/-55k)
  - h.Pressure test csg to 350 psi for 15 minutes, 1,000 psi for 15 minutes
- 9.If csg leak is below surface csg shoe (shoe at 3,766'):
  - a.RIH set RBP 100' below csg leak, dump bail sand on top of RBP
  - b.RIH w/ tbg to 50' below csg leak; establish circulation down production csgand up surface csg
  - c.Pump 50 sks cmt to balance from 50' below to 100' above csg leakinside/outside 4-1/2" 11.6# csg
  - d.PU tbg to 100' above csg leak and circulate hole clean
  - e.RIH w/ bit and drill out 150' cement plug from inside 4-1/2" csg
  - f.Pressure test csg to 350 psi for 30 minutes
  - g. RIH to retrieve top RBP, washing sand and circulating hole clean prior to latching up
10. RIH and retrieve lower RBP; POOH entire string, visually inspect tbg and tally
11. RIH with production tubing while HYDROTESTING, make light tag on fill
  - a. Note – Run lower grade pipe on bottom of string. Clearly notate within daily operation activity details the makeup of the string (grade, color, depths)
12. POOH to land depth +/-11,268 (+/-97%). Pump tbg volume if tagged to clear tbg; Hydrotest hanger connection
13. RDMO Service Unit and cleanup location

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]

**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
1	Wildlife	1. Wildlife – Minimization: To minimize the potential for wildlife related traffic accidents, TEP has implemented speed restrictions for all lease roads and requires that all TEP employees and contractors adhere to these posted speed restrictions.
2	Wildlife	2. Wildlife – Minimization: TEP will make best efforts to minimize operations at these location during winter months by conducting operations, when possible, between 9:00am to 4:00pm when wildlife activity minimal
3	Wildlife	3. Wildlife –Minimization: TEP will minimize vehicle numbers and traffic by carpooling to the site whenever possible

Total: 3 comment(s)

**Operator Comments:**

TEP Rocky Mountain LLC (TEP) respectfully requests approval to repair casing subject well. Please find attached procedure and WBD. CPW Consult 03/05/2026. Please see attached.

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

Signed: \_\_\_\_\_ Print Name: Blythe Befus

Title: Sr Regulatory Analyst Email: Progressive@flywheelenergy.com Date: 3/5/2026

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

ECMC Approved: Wild, Renee Date: 3/12/2026

## CONDITIONS OF APPROVAL, IF ANY LIST

<u>COA Type</u>	<u>Description</u>
1 COA	<p>1) For applicable operations, report work completed within 30 days on a Form 4 Sundry REPORT OF WORK DONE - Repair Well noting final pressure test results and include any operational or job summaries. If the wellbore geometry changes or there is not an updated WBD in the well file submit an updated WBD.</p> <p>2) For applicable operations, submit a Form 5 and/or 5A (updated packer and tubing depths) within 30 days of the work with job related documents including a minimum of one of the following attachments: operations summary, cement job summary and/or wireline summary. Additionally, include CBL's and any additional logs run.</p> <p>3) Complete a bradenhead test within 30 days of completing the repair and submit results on a Form 17</p> <p>4) Provide electronic Form 42 Notice of MIRU 2 business days ahead of operations</p> <p>5) Operator shall notify ECMC Engineering staff of changes and/or additional repair methods to the approved repair procedure.</p> <p>6) If cement is pumped above the TOC, it shall be verified with a CBL and documented with a Form 5 within 30 days of repair operations.</p>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
OGLA	<p>CPW consult addresses wildlife concerns. No surface water concerns.</p> <p>LAS review complete.</p>	03/12/2026
Engineer	<p>Operator plans to use gas as the mechanism for pressure testing</p> <p>Location of leak is unknown - procedure includes two different options based on the location of leak</p> <p>Repair has a plan to replace damaged casing and/or a contingency if the leak is below the TOC</p> <p>Depending on the casing leak location, additional squeeze plugs may be required lower in the wellbore to meet future P&amp;A requirements. See COA 5 to contact area engineer or supervisor to review cementing operations prior to pumping.</p>	03/09/2026

Total: 2 comment(s)

### ATTACHMENT LIST

<u>Att Doc Num</u>	<u>Name</u>
404542692	SUNDRY NOTICE APPROVED-OBJ-SBSQ-OPS-REPAIR
404542695	PROPOSED PROCEDURE
404542700	WELLBORE DIAGRAM
404567950	CPW CONSULTATION
404578426	FORM 4 SUBMITTED

Total Attach: 5 Files