

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)894-2100 Fax: (303)894-2109



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COGCC/Rifle Office

SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (Page 2 of this form.) Identify well or other facility by API Number or by OGCC Facility ID. Operator shall send an informational copy of all sundry notices for wells located in High Density Areas to the Local Government Designee (Rule 603b.)

1. OGCC Operator Number: 28600	4. Contact Name Lynn Neely	Complete the Attachment Checklist OP OGCC
2. Name of Operator: Exxon Mobil Corporation	Phone: 281-654-1949	
3. Address: P. O. Box 4358, COPR-MI-205	Fax: 262-313-9747	
City: Houston State: Tx Zip 77210-4358		
5. API Number 05-103-11633-00	OGCC Facility ID Number	Survey Plat
6. Well/Facility Name: Freedom Unit	7. Well/Facility Number 197-28A5	Directional Survey
8. Location (QtrQtr, Sec, Twp, Rng, Meridian): NWSW, Sec. 28, T1S, R97W, 6th P.M.		Surface Eqpm Diagram
9. County: Rio Blanco	10. Field Name: Piceance Creek	Technical Info Page
11. Federal, Indian or State Lease Number: Fee Property		Other

General Notice

☐ **CHANGE OF LOCATION:** Attach New Survey Plat (a change of surface qtr/qtr is substantive and requires a new permit)

Change of Surface Footage from Exterior Section Lines:	FNL/FSL	FEL/FWL
Change of Surface Footage to Exterior Section Lines:		
Change of Bottomhole Footage from Exterior Section Lines:		
Change of Bottomhole Footage to Exterior Section Lines:		

Bottomhole location Qtr/Qtr, Sec, Twp, Rng, Mer _____ attach directional survey

Latitude _____ Distance to nearest property line _____ Distance to nearest bldg, public rd, utility or RR _____

Longitude _____ Distance to nearest lease line _____ Is location in a High Density Area (rule 603b)? Yes/No ☐

Ground Elevation _____ Distance to nearest well same formation _____ Surface owner consultation date: _____

GPS DATA:

Date of Measurement _____ PDOP Reading _____ Instrument Operator's Name _____

<input type="checkbox"/> CHANGE SPACING UNIT	<input type="checkbox"/> Remove from surface bond
Formation _____ Spacing order number _____ Unit Acreage _____ Unit configuration _____	Signed surface use agreement attached

<input type="checkbox"/> CHANGE OF OPERATOR (prior to drilling):	<input type="checkbox"/> CHANGE WELL NAME	NUMBER
Effective Date: _____	From: _____	
Plugging Bond: <input type="checkbox"/> Blanket <input type="checkbox"/> Individual	To: _____	
	Effective Date: _____	

<input type="checkbox"/> ABANDONED LOCATION:	<input type="checkbox"/> NOTICE OF CONTINUED SHUT IN STATUS
Was location ever built? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date well shut in or temporarily abandoned: _____
Is site ready for inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No	Has Production Equipment been removed from site? <input type="checkbox"/> Yes <input type="checkbox"/> No
Date Ready for Inspection: _____	MIT required if shut in longer than two years. Date of last MIT _____

<input type="checkbox"/> SPUD DATE: _____	<input type="checkbox"/> REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)
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<input type="checkbox"/> SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK	*submit cbl and cement job summaries
Method used _____ Cementing tool setting/perf depth _____ Cement volume _____ Cement top _____ Cement bottom _____ Date _____	

☐ **RECLAMATION:** Attach technical page describing final reclamation procedures per Rule 1004.

Final reclamation will commence on approximately _____ ☐ Final reclamation is completed and site is ready for inspection.

Technical Engineering/Environmental Notice

<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Report of Work Done
Approximate Start Date: _____	Date Work Completed: _____

Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)

<input type="checkbox"/> Intent to Recomplete (submit form 2)	<input type="checkbox"/> Request to Vent or Flare	<input type="checkbox"/> E&P Waste Disposal
<input type="checkbox"/> Change Drilling Plans	<input type="checkbox"/> Repair Well	<input type="checkbox"/> Beneficial Reuse of E&P Waste
<input type="checkbox"/> Gross Interval Changed?	<input type="checkbox"/> Rule 502 variance requested	<input type="checkbox"/> Status Update/Change of Remediation Plans
<input type="checkbox"/> Casing/Cementing Program Change	<input checked="" type="checkbox"/> Other: Change Production Casing Depth	for Spills and Releases

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

Signed: Lynn Neely Date: 02/03/2010 Email: lynn.r.neely@exxonmobil.com

Print Name: Lynn Neely Title: Regulatory Specialist

COGCC Approved: [Signature] Title: [Signature] Date: 2/4/10

CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

1.	OGCC Operator Number:	28600	API Number:	05-103-11633-00
2.	Name of Operator:	Exxon Mobil Corporation	OGCC Facility ID #	0
3.	Well/Facility Name:	Freedom Unit	Well/Facility Number:	197-28A5
4.	Location (QtrQtr, Sec, Twp, Rng, Meridian): NWSW, Sec. 28, T1S, R97W, 6th P.M.			

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within 30 days of work completed as a "subsequent" report and must accompany Form 4, page 1.

5. DESCRIBE PROPOSED OR COMPLETED OPERATIONS

ExxonMobil requests that the Setting Depth and the Cement Bottom on the Production Casing (2nd) be change to 12,800'. Proposed Total Measured Depth of this well will remain 13,500'.