



Page 1

State of Colorado
Oil and Gas Conservation Commi

1100 Lincoln Street, Suite 601, Denver, Colorado 80202 Phone: (303) 861-3000



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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).

RECEIVED

NOV 01 2010

COGCC

1. OGCC Operator Number: 16141	4. Contact Name: Bill Bagg	Complete the Attachment Checklist
2. Name of Operator: Coastal Plains Energy, Inc.	Phone: 817-962-8055	
3. Address: 420 Truckmon, Suite 630	Fax: 817-336-3223	OP OGCC
City: Fort Worth State: TX Zip: 76102		
5. API Number: 05-121-10832	OGCC Facility ID Number	Survey Plat
6. Well/Facility Name: Smelter	7. Well/Facility Number: 22-1	Directional Survey
8. Location (Dir/Qty, Sec, Twp, Rng, Meridian): SE SE Sec 22 T18 R51W 6th PM		Surface Expend Diagram
9. County: Washington	10. Field Name: Wildcat	Technical Info Page
11. Federal, Indian or State Lease Number		Other

General Notice

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

Change of Surface Footage from Exterior Section Lines: ☐ FULLER ☐ FULLER

Change of Surface Footage to Exterior Section Lines: ☐ ☐ ☐ ☐

Change of Bottomhole Footage from Exterior Section Lines: ☐ ☐ ☐ ☐

Change of Bottomhole Footage to Exterior Section Lines: ☐ ☐ ☐ ☐ attach directional survey

Bottomhole location Dir/Qty, Sec, Twp, Rng, Mer:
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:

☐ CHANGE SPACING UNIT
Formation:
Formation Code:
Spacing order number:
Unit acreage:
Unit configuration:
☐ Remove from surface bond
Signed surface use agreement attached

☐ CHANGE OF OPERATOR (prior to drilling):
Effective Date:
Pugging Bond ☐ Blanket ☐ Individual

☐ CHANGE WELL NAME
From:
To:
Effective Date:

☒ ABANDONED LOCATION:
Was location ever built? ☒ Yes ☐ No
Is site ready for inspection? ☐ Yes ☐ No
Date Ready for inspection: August 1, 2007

☐ NOTICE OF CONTINUED SHUT IN STATUS
Date well shut in or temporarily abandoned:
Has Production Equipment been removed from site? ☐ Yes ☐ No
MIT required if shut in longer than two years Date of last MIT:

☐ SPUD DATE:
☐ REQUEST FOR CONFIDENTIAL STATUS (if more than date casing set)

☐ SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK
Method used:
Cementing tool setting/depth:
Cement volume:
Cement top:
Cement bottom:
Date:
*submit cbl and cement job summaries

☐ 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

☐ Notice of Intent
Approximate Start Date:
☐ Report of Work Done
Date Work Completed:

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

☐ Intent to Recomplete (submit form 2)
☐ Change Drilling Plans
☐ Gross Interval Changed?
☐ Casing/Cementing Program Change

☐ Request to Vard or Plans
☐ Repair Well
☐ Rule 502 variance requested
☐ Other: _____

☐ ESP Waste Disposal
☐ Beneficial Reuse of ESP Waste
☐ Status Update/Change of Remediation Plans
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: William R. Bagg Date: 10-27-10 Email: xbagg@coenergy.com
Print Name: William R. Bagg Title: PresidentCOGCC Approval: Daniel S. Neelander Date: 2/14/2011
CONDITIONS OF APPROVAL, IF ANY: