

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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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:	10276	4. Contact Name	Jill Lazatin
2. Name of Operator:	Pine Ridge Resources LLC	Phone:	303-226-1316
3. Address:	600 17th Street Ste 800S	Fax:	303-226-1301
City:	Denver	State:	CO
Zip:	80202		
5. API Number	05-041-06063-00	OGCC Facility ID Number	419746
6. Well/Facility Name:	Naos State	7. Well/Facility Number	32-4
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian):	SWNE Sec4 T16S R64W		
9. County:	El Paso	10. Field Name:	Wild Cat
11. Federal, Indian or State Lease Number:			

Complete the Attachment Checklist

OP OGCC

Survey Plat		
Directional Survey		
Surface Eqpmt Diagram		
Technical Info Page		
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:					attach directional survey

Bottomhole location Qtr/Qtr, 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 <input type="checkbox"/>
Ground Elevation	_____	Distance to nearest well same formation	_____	Surface owner consultation date:	_____

GPS DATA:

Date of Measurement	_____	PDOP Reading	_____	Instrument Operator's Name	_____
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☐ 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:	_____
Plugging Bond:	<input type="checkbox"/> Blanket <input type="checkbox"/> Individual

☐ CHANGE WELL NAME

From:	_____	NUMBER	_____
To:	_____		_____
Effective Date:	_____		

☐ ABANDONED LOCATION:

Was location ever built?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is site ready for Inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date Ready for Inspection:	_____

☐ NOTICE OF CONTINUED SHUT IN STATUS

Date well shut in or temporarily abandoned:	_____
Has Production Equipment been removed from site?	<input type="checkbox"/> Yes <input type="checkbox"/> No
MIT required if shut in longer than two years. Date of last MIT	_____

☐ SPUD DATE: \_\_\_\_\_

☒ REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)

☐ SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK

Method used	Cementing tool setting/perf 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	_____	<input type="checkbox"/> Final reclamation is completed and site is ready for inspection.
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Technical Engineering/Environmental Notice

☐ Notice of Intent

Approximate Start Date:	_____
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☐ Report of Work Done

Date Work Completed:	_____
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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 type="checkbox"/> Other: _____	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:	_____	Date:	03/23/2011	Email:	jill.lazatin@cometridgeresources.com
Print Name:	Jill Lazatin	Title:	Engineering Technician		

COGCC Approved:	_____	Title:	_____	Date:	_____
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CONDITIONS OF APPROVAL, IF ANY: