

State of  
Oil and Gas Conservation

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

## 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.)



DE	ET	DA	PS
RECEIVED			
MAY 16 2012			
OGCC/Rifle Office			

Complete the Attachment  
Checklist

OP OGCC

1. OGCC Operator Number: 66571  
2. Name of Operator: OXY USA WTP LP, Attn: Glenda Jones  
3. Address: P.O. Box 27757  
City: Houston State: TX Zip: 77227-7757  
4. Contact Name: Joan Proulx  
Phone: 970-263-3641  
Fax: 970-263-3694

5. API Number: 05-045-17892-00 OGCC Facility ID Number:  
6. Well/Facility Name: Shell 7. Well/Facility Number: 797-03-298  
8. Location (QtrQtr, Sec, Twp, Rng, Meridian): Tract 71 S3 7S 97W 6 PM  
9. County: Garfield 10. Field Name: Grand Valley  
11. Federal, Indian or State Lease Number: N/A

Survey Plat		
Directional Survey		
Surface Eqmpt Diagram		
Technical Info Page	X	
Other		

## General Notice

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

	FNL/FSL	FEL/FWL
Change of Surface Footage from Exterior Section Lines:		
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: \_\_\_\_\_

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: \_\_\_\_\_  
Plugging Bond: ☐ Blanket ☐ Individual☐ CHANGE WELL NAME

## NUMBER

From: \_\_\_\_\_  
To: \_\_\_\_\_  
Effective Date: \_\_\_\_\_☐ ABANDONED LOCATION:Was location ever built? ☐ Yes ☐ No  
Is site ready for inspection? ☐ Yes ☐ No  
Date Ready for Inspection: \_\_\_\_\_☐ NOTICE OF CONTINUED SHUT IN STATUSDate 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 (6 mos from date casing set)☐ 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

☐ 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.)

<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 checked="" 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: 5/16/2012 Email: joan\_proulx@oxy.com

Print Name: Joan Proulx

Title: Regulatory Analyst

COGCC Approved: \_\_\_\_\_

Title: NWA E

Date: 5/17/12

CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

1. OGCC Operator Number:	66571	API Number:	05-045-17892-00
2. Name of Operator:	OXY USA WTP LP	OGCC Facility ID #	
3. Well/Facility Name:	Shell	Well/Facility Number:	797-03-29B
4. Location (QtrQtr, Sec, Twp, Rng, Meridian):	Tract 71 S3 7S 97W 6 PM		

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

The Shell 797-03-29B well was originally permitted for a surface casing depth of 1,300' with a surface casing hole size of 14 3/4".  
The updated casing plan for this well is to land the surface casing at 1,000' and the surface casing hole size will be 12 1/4".

Verbal approval was received from David Andrews on May 16, 2012.