



SUNDRY NOTICE



DC _____ ST _____

Complete the Attachment Checklist

OP OGCC

RECEIVED
MAR 11 2013
COGCC/Rifle Office

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: 96850	4. Contact Name: Greg Davis
2. Name of Operator: WPX Energy Rocky Mountain, LLC	Phone: 303-606-4071
3. Address: 1001 17th Street, Suite 1200	Fax: 303-629-8268
City: Denver State: CO Zip: 80202	
5. API Number 05-045-21692-00	OGCC Facility ID Number
6. Well/Facility Name: Lantz	7. Well/Facility Number: SG 543-23
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): SESE Section 23-T7S-R96W 6th PM	
9. County: Garfield	10. Field Name: Grand Valley
11. Federal, Indian or State Lease Number:	

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 _____

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 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** (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: 3/11/13

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 checked="" 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: Vent Bradenhead Pressure	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: Greg Davis Date: 3/11/13 Email: greg.j.davis@wpxenergy.com
Print Name: Greg Davis Title: Supervisor Permits

COGCC Approved: [Signature] Title: NWA Engineer Date: 3/11/13

CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY



- 1. OGCC Operator Number: 96850 API Number: 05-045-21692-00
- 2. Name of Operator: WPX Energy Rocky Mountain, LLC OGCC Facility ID # _____
- 3. Well/Facility Name: Lantz Well/Facility Number: SG 543-23
- 4. Location (QtrQtr, Sec, Twp, Rng, Meridian): SESE Section 23-T7S-R96W 6th 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

SG 543-23 (05-045-21692) – MV Well

- 1. This well is a new drill (spud: 2/21/2013)
- 2. Top of Cement – 2,400'
- 3. This well does not cover 200' above the top of the MV (Geology Pick: 2,462')
- 4. This well does cover the top of gas (Geology Pick: 3,709')
- 5. Top Perf: 3,861'

Bradenhead pressure on the subject well is 240 psi. WPX requests permission to vent the bradenhead to a tank. Completions on this well are scheduled for mid-April, at which time WPX will get another build up test and see where we stand with the bradenhead pressure.