

FORM
4
Rev 12/05

Page 1

State of Colorado
Oil and Gas Conservation Commission
 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).

RECEIVED
5/8/2013

| | | |
|--|------------------------------------|-----------------------------------|
| 1 OGCC Operator Number: 100264 | 4 Contact Name: Jessica Dooling | Complete the Attachment Checklist |
| 2 Name of Operator: XTO Energy Inc | Phone: 970-675-4122 | |
| 3 Address: PO Box 6501 | Fax: 970-675-4150 | |
| City: Englewood State: CO Zip: 80155 | | |
| 5 API Number: 05-103-05171-00 | OGCC Facility ID Number: 314328 | OP OGCC |
| 6 Well/Facility Name: Piceance Creek Unit | 7 Well/Facility Number: T84-15G | Survey Plat |
| 8 Location (Qtr/Sec, Twp, Rng, Meridian): SENE, 15, 2S, 96W, 6th | | Directional Survey |
| 9 County: Rio Blanco | 10 Field Name: Piceance Creek Unit | Surface Eqm't Diagram |
| 11 Federal, Indian or State Lease Number: COD035677 | | 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: ☐ ☐ ☐ ☐

Bottomhole location 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: _____

☐ **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**

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: _____

☐ 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 for Spills and Releases |
| <input type="checkbox"/> Casing/Cementing Program Change | <input checked="" type="checkbox"/> Other: See Page 2 | |

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

Signed: Jessica Dooling Date: 5/8/2013 Email: jessica_dooling@xtoenergy.com

Print Name: Jessica Dooling Title: Piceance EH&S Supervisor

OGCC Approved: Cathy Kuyus Title: EPS II Date: 05/13/2013

CONDITIONS OF APPROVAL, IF ANY: NW Region

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TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

- | | | | |
|--|------------------------|-----------------------|-----------------|
| 1. OGCC Operator Number: | 100264 | API Number: | 05-103-07036-00 |
| 2. Name of Operator: | XTO Energy Inc. | OGCC Facility ID # | 314328 |
| 3. Well/Facility Name: | Piceance Creek Unit | Well/Facility Number: | PCU T84-15G |
| 4. Location (QtrQtr, Sec, Twp, Rng, Meridian): | SENE, 15, 2S, 96W, 6th | | |

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.

DESCRIBE PROPOSED OR COMPLETED OPERATIONS

XTO Energy (XTO) completed closure of the Partially Buried Tank Pit on the PCU T84-15G location on 5/6/2013 in accordance with COGCC 900 and 1000 Series Rules.

XTO herein requests No Further Action (NFA) for REM #7472 / DOC #2231458.