

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE	ET	OE	ES
----	----	----	----

Document Number:

400419399

SUNDRY NOTICE

Submit a signed original. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full in Comments or provide as an attachment. Identify Well by API Number; identify Oil and Gas Location by Location ID Number; identify other Facility by Facility ID Number.

OGCC Operator Number:	100185	Contact Name	Jane Washburn
Name of Operator:	ENCANA OIL & GAS (USA) INC	Phone:	(720) 876-5431
Address:	370 17TH ST STE 1700	Fax:	(720) 876-6431
City:	DENVER	State:	CO
Zip:	80202-5632	Email:	

Complete the Attachment
Checklist

OP OGCC

API Number :	05-123 20775 00	OGCC Facility ID Number:	262693
Well/Facility Name:	MILLER	Well/Facility Number:	22-17
Location QtrQtr:	NENW	Section:	17
Township:	2N	Range:	67W
Meridian:	6	County:	WELD
Field Name:	WATTENBERG	Federal, Indian or State Lease Number:	

Survey Plat		
Directional Survey		
Srvc Eqpmt Diagram		
Technical Info Page		
Other		

CHANGE OF LOCATION OR AS BUILT GPS REPORT

☐ Change of Location * ☐ As-Built GPS Location Report ☐ As-Built GPS Location Report with Survey

* Well location change requires new plat. A substantive surface location change may require new Form 2A.

SURFACE LOCATION GPS DATA Data must be provided for Change of Surface Location and As Built Reports.

Latitude _____ PDOP Reading _____ Date of Measurement _____
 Longitude _____ GPS Instrument Operator's Name _____

LOCATION CHANGE (all measurements in Feet)

Well will be: _____ (Vertical, Directional, Horizontal)

Change of **Surface** Footage **From** Exterior Section Lines:Change of **Surface** Footage **To** Exterior Section Lines:Current **Surface** Location **From** QtrQtr **NENW** Sec **17**New **Surface** Location **To** QtrQtr _____ Sec _____Change of **Top of Productive Zone** Footage **From** Exterior Section Lines:Change of **Top of Productive Zone** Footage **To** Exterior Section Lines:Current **Top of Productive Zone** Location **From** Sec _____New **Top of Productive Zone** Location **To** Sec _____Change of **Bottomhole** Footage **From** Exterior Section Lines:Change of **Bottomhole** Footage **To** Exterior Section Lines:Current **Bottomhole** Location Sec _____ Twp _____New **Bottomhole** Location Sec _____ Twp _____

Is location in High Density Area? _____

Distance, in feet, to nearest building _____, public road: _____, above ground utility: _____, railroad: _____,

property line: _____, lease line: _____, well in same formation: _____

Ground Elevation _____ feet Surface owner consultation date _____

FNL/FSL		FEL/FWL	
510	FNL	1858	FWL
Twp 2N	Range 67W	Meridian 6	
Twp	Range	Meridian	
2080		2080	
			**
Twp	Range		
Twp	Range		
2080		2080	
			**
Twp	Range		
Twp	Range		

** attach deviated drilling plan

CHANGE OR ADD OBJECTIVE FORMATION AND/OR SPACING UNIT				
<u>Objective Formation</u>	<u>Formation Code</u>	<u>Spacing Order Number</u>	<u>Unit Acreage</u>	<u>Unit Configuration</u>

<u>Objective Formation</u>	<u>Formation Code</u>	<u>Spacing Order Number</u>	<u>Unit Acreage</u>	<u>Unit Configuration</u>

OTHER CHANGES

☐ **REMOVE FROM SURFACE BOND** Signed surface use agreement is a required attachment

☐ **CHANGE OF WELL, FACILITY OR OIL & GAS LOCATION NAME OR NUMBER**

From: Name MILLER Number 22-17 Effective Date: _____

To: Name _____ Number _____

☐ **ABANDON PERMIT: Permit can only be abandoned if the permitted operation has NOT been conducted. Field inspection will be conducted to verify site status.**

☐ WELL: Abandon Application for Permit-to-Drill (Form2) – Well API Number _____ has not been drilled.

☐ PIT: Abandon Earthen Pit Permit (Form 15) – COGCC Pit Facility ID Number _____ has not been constructed (Permitted and constructed pit requires closure per Rule 905)

☐ CENTRALIZED E&P WASTE MANAGEMENT FACILITY: Abandon Centralized E&P Waste Management Facility Permit (Form 28) – Facility ID Number _____ has not been constructed (Constructed facility requires closure per Rule 908)

OIL & GAS LOCATION ID Number: _____

☐ Abandon Oil & Gas Location Assessment (Form 2A) – Location has not been constructed and site will not be used in the future.

☐ Keep Oil & Gas Location Assessment (Form 2A) active until expiration date. This site will be used in the future.

Surface disturbance from Oil and Gas Operations must be reclaimed per Rule 1003 and Rule 1004.

☐ **REQUEST FOR CONFIDENTIAL STATUS**

☐ **DIGITAL WELL LOG UPLOAD**

☐ **DOCUMENTS SUBMITTED** Purpose of Submission: _____

RECLAMATION

INTERIM RECLAMATION

☐ Interim Reclamation will commence approximately _____
Per Rule 1003.e.(3) operator shall submit Sundry Notice reporting interim reclamation is complete and site is ready for inspection when vegetation reaches 80% coverage.

☐ Interim reclamation complete, site ready for inspection.
Per Rule 1003.e(3) describe interim reclamation procedure in Comments below or provide as an attachment and attach required location photographs.

Field inspection will be conducted to document Rule 1003.e. compliance

FINAL RECLAMATION

☐ Final Reclamation will commence approximately _____
Per Rule 1004.c.(4) operator shall submit Sundry Notice reporting final reclamation is complete and site is ready for inspection when vegetation reaches 80% coverage.

☐ Final reclamation complete, site ready for inspection. Per Rule 1004.c(4) describe final reclamation procedure in Comments below or provide as an attachment.

Field inspection will be conducted to document Rule 1004.c. compliance

Comments:

ENGINEERING AND ENVIRONMENTAL WORK

☐ NOTICE OF CONTINUED TEMPORARILY ABANDONED STATUS

Indicate why the well is temporarily abandoned and describe future plans for utilization in the COMMENTS box below or provide as an attachment, as required by Rule 319.b.(3).

Date well temporarily abandoned _____ Has Production Equipment been removed from site? _____

Mechanical Integrity Test (MIT) required if shut in longer than 2 years. Date of last MIT _____

☐ SPUD DATE: _____

TECHNICAL ENGINEERING AND ENVIRONMENTAL WORK

Details of work must be described in full in the COMMENTS below or provided as an attachment.

☒ NOTICE OF INTENT Approximate Start Date 06/13/2013

☐ REPORT OF WORK DONE Date Work Completed _____

- | | | |
|---|---|--|
| <input checked="" type="checkbox"/> Intent to Recomplete (Form 2 also required) | <input type="checkbox"/> Request to Vent or Flare | <input type="checkbox"/> E&P Waste Mangement Plan |
| <input type="checkbox"/> Change Drilling Plan | <input type="checkbox"/> Repair Well | <input type="checkbox"/> Beneficial Reuse of E&P Waste |
| <input type="checkbox"/> Gross Interval Change | <input type="checkbox"/> Rule 502 variance requested. Must provide detailed info regarding request. | |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases | |

COMMENTS:

Miller 22-17 Refrac Procedure

1. Catch Plunger. If standing valve is present, RU wireline and pull bumper spring and standing valve. RD Wireline.
 2. Remove all plunger equipment from wellhead.
 3. Locate and check for rig anchors. Dress location. One Call may be required for new anchors. This step may not be necessary if using a base beam.
 4. Hold pre-job safety meeting. Identify any safety concerns and discuss prior to beginning job.
 5. MIRU pulling unit.
 6. Inspect all heads, nuts and valves. Dig out if necessary. Check bradenhead pressure. Call production engineer if there is any significant bradenhead pressure. Make sure all valves are functioning properly. Replace/repair any equipment not working, not packed-off properly or missing.
 7. Blow down well and kill well with fresh or produced water. ND wellhead, NU BOPE.
 8. Tag bottom. POOH w/tubing, hydrotest and tally. RIH to PBTD w/bit & scraper. Clean out any fill. POOH.
 9. RIH with packer assembly. Set packer 100' above top perf in middle of casing joint. Load well and Pressure test casing to 80% of wellhead pressure rating, not to exceed 5000 psi. If pressure test fails, please contact Production Engineer for path forward.
 10. Release packer and POOH.
 11. Lay down tubing and visually inspect. Contact Production Engineer if corrosion is found.
 12. ND BOPE, NU well head.
 13. RDMO pulling unit.
 14. MIRU wireline unit.
 15. RIH with Cast Iron Bridge Plug and set at 8210 ft.
 16. RD wireline unit.
 17. MIRU Stinger/Wellhead Isolation Tool. Ensure tattle tale tank is part of rig up.
 18. MIRU Frac Company.
 19. Pressure test surface equipment to 6500 psi.
 20. Pump Codell frac job down casing according to design.
 21. Remove Stinger from wellhead.
 22. MIRU wireline unit.
 23. RIH and set CBP at ~7800 ft. POOH.
 24. RIH with 3-1/8" 4 SPF perf guns, correlate and shoot 7652-7678'. POOH.
 25. RD Wireline unit.
 26. NU Stinger
 27. Pump Niobrara frac job down casing according to design
 28. RDMO frac company and Stinger.
- ### Commingling Procedure
29. Verify commingling procedure with Denver engineer before proceeding.
 30. MIRU pulling unit.
 31. ND well head, NU BOPE.
 32. PU tubing and RIH w/bit. Tag sand and note depth of top of sand in Well View report. Circulate out sand and drill up CIBP. Clean out to PBTD.
 33. POOH w/ bit.
 34. RIH w/ prod tubing, notch collar and SN. Land at 8290 ft. (top of J if present, if not top of Codell)
 35. ND BOP. NU wellhead.
 36. Broach/Gauge tubing. Swab if necessary.
 37. RDMO pulling unit.
 38. Turn well over to production.

CASING AND CEMENTING CHANGES

Casing Type	Size	Of	/	Hole	Size	Of	/	Casing	Wt/Ft	Csg/LinTop	Setting Depth	Sacks of Cement	Cement Bottom	Cement Top

H2S REPORTING

Data Fields in this section are intended to document Sample and Location Data associated with the collection of a Gas Sample that is submitted for Laboratory Analysis.

Gas Analysis Report must be attached.

H2S Concentration: _____ in ppm (parts per million)

Date of Measurement or Sample Collection _____

Description of Sample Point:

Absolute Open Flow Potential _____ in CFPD (cubic feet per day)

Description of Release Potential and Duration (If flow is not open to the atmosphere, identify the duration in which the container or pipeline would likely be opened for servicing operations.):

--

Distance to nearest occupied residence, school, church, park, school bus stop, place of business, or other areas where the public could reasonably be expected to frequent: _____

Distance to nearest Federal, State, County, or municipal road or highway owned and principally maintained for public use: _____

COMMENTS:

--

BMP

<u>Type</u>	<u>Comment</u>

Total: 0 comment(s)

Operator Comments:

--

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

Signed: _____ Print Name: Jane Washburn
Title: Operations Technologist Email: jane.washburn@encana.com Date: _____

Based on the information provided herein, this Sundry Notice (Form 4) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ Date: _____

CONDITIONS OF APPROVAL, IF ANY:

--

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>

Total Attach: 0 Files