

State of Colorado Oil and Gas Conservation Commission

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



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Document Number:

400423111

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: 96850 Contact Name Howard Harris
 Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC Phone: (303) 606-4086
 Address: 1001 17TH STREET - SUITE #1200 Fax: (303) 629-8268
 City: DENVER State: CO Zip: 80202 Email: howard.harris@wpxenergy.com

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 045 19704 00 OGCC Facility ID Number: 418445
 Well/Facility Name: Federal Well/Facility Number: SP 431-14
 Location QtrQtr: SWNE Section: 14 Township: 7S Range: 95W Meridian: 6
 County: GARFIELD Field Name: PARACHUTE
 Federal, Indian or State Lease Number: COC05173

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 SWNE Sec 14

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 14

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 14 Twp 7S

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	
2520	FNL	2610	FEL
Twp <u>7S</u>	Range <u>95W</u>	Meridian <u>6</u>	
Twp <u> </u>	Range <u> </u>	Meridian <u> </u>	
845	FNL	1964	FEL
Twp <u>7S</u>	Range <u>95W</u>		
Twp <u> </u>	Range <u> </u>		
845	FNL	1964	FEL
Twp <u>7S</u>	Range <u>95W</u>		
Twp <u> </u>	Range <u> </u>		

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** 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>

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 Federal Number SP 431-14 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 05/29/2013

☐ REPORT OF WORK DONE Date Work Completed _____

- | | | |
|--|---|--|
| <input 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 checked="" type="checkbox"/> Other <u>Remediate LTOC</u> | <input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases | |

COMMENTS:

The well experienced a poor cement job on the surface cement job due to lost circulation and was unable to get cement to surface. WPX requests permission to remediate the LTOC per the attached procedure.

WPX Energy
Remedial Cement Procedure

Wellname: SP 431-14(32-14) Prepared By: Kinzie Beavers
Date: 5/22/2013 Cell phone: 720-202-1068
Field: South Parachute Office phone: 303-606-4365

Purpose: Remediate low top of cement - surface casing

Well Information:

API Number: 05-045-19704
Surface Casing: 9-5/8" 32.3# H-40
Surface Shoe Depth: 2403 ft
Surface Casing Float Depth: 2357 ft
Correlate Log: Baker CBL Log - 11/26/2011
Current TOC: 1155 ft
Max pressure: 1000 psi

Well History:

Spud 11/16/11 @ 1:00am.
Lost circulation @ 760' - 70 bbls, able to mix LCM and regain circulation.
Lost circulation again @ 1012' - 450 bbls, 30% LCM sweep not successful.
Pumped 45 sacks of cotton seed hulls down conductor w/155 bbls mud, no returns.
Drilled without returns to 1031' - lost 375 bbls.
Set 500 sx cement lost circulation plug through open ended drill pipe @ 1004'. Tagged top @ 705'.
Lost returns @ 1083' - 325 bbls, @ 1582' - 375 bbls, 350 bbls seepage, @ 1799' - 800 bbls, @ 2418' - 225 bbls.
85-90% returns during cement job until displacement when returns were lost again.

WPX would like to continue remediation work on this well to eliminate low top of cement on surface casing.

Proposed Procedure:

- 1 Perforate 6 squeeze holes at 940'. Deepest true free pipe
- 2 Pump injection test at 3 bpm and 4 bpm.
Get ISIP, 5, 10 and 15 minute shut in pressures
Call Kinzie/Kristin Trahan with results
- 3 MIRU HES Cement Crew.
Pump 530 sx 15.8 ppg Neat G Cement yield 1.15 ft³/sk with bradenhead open
- 4 SI Bradenhead to allow cement to set.
- 5 Allow for 12 - 24 hrs cement set time.
- 6 Run CBL from cement tag to surface (Send .pdf and hard copy to Denver)
Pressure Test Squeeze Holes to 500 psi
- If there is cement coverage to surface, proceed as follows:
7 RIH w/ bit and 2 3/8" tubing
Drill out cement at ~850 ft.
Clean out rathole.
Run final CBL.
SI well, wait to drill production hole.
- 8 Otherwise, call Denver for further direction.

Field Contact:

Kyle Kohl 970-263-2713 Completions Supervisor
Kent Kejl 970-629-2404 Completions District Manager

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:

See comments under Engineering/Environmental

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

Signed: _____ Print Name: Howard Harris

Title: Sr. Regulatory Specialist Email: howard.harris@wpxenergy.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:

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General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
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Total: 0 comment(s)

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files