

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:
2167190

Date Received:
08/13/2013

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: 10434 Contact Name TOM STOVER

Name of Operator: ATOM PETROLEUM LLC Phone: (303) 883-6293

Address: 3323 N MIDLAND DR #113 Fax: (303) 858-8499

City: MIDLAND State: TX Zip: 79707 Email: TSTOVER0807@COMCAST.NET

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 067 06777 00 OGCC Facility ID Number: 215172

Well/Facility Name: TAYLOR NO. 3 Well/Facility Number: T3-4

Location QtrQtr: NENE Section: 3 Township: 33N Range: 12W Meridian: N

County: LA PLATA Field Name: ALKALI GULCH

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:

	FNL/FSL		FEL/FWL
660	FNL	660	FEL

Change of **Surface** Footage **To** Exterior Section Lines:

--	--	--	--

Current **Surface** Location **From** QtrQtr NENE Sec 3 Twp 33N Range 12W Meridian N

New **Surface** Location **To** QtrQtr _____ Sec _____ Twp _____ Range _____ Meridian _____

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 _____ Twp _____ Range _____

New **Top of Productive Zone** Location **To** Sec _____ Twp _____ Range _____

Change of **Bottomhole** Footage **From** Exterior Section Lines:

--	--	--	--

Change of **Bottomhole** Footage **To** Exterior Section Lines:

--	--	--	--

Current **Bottomhole** Location Sec _____ Twp _____ Range _____

New **Bottomhole** Location Sec _____ Twp _____ Range _____

** attach deviated drilling plan

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 _____

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 08/27/2013

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 checked="" 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:

1) THIS IS AN EXISTING WELL. COMPLETED PER COGCC 7/11/85 WELL STATUS TA PER COGCC SINCE 3/8/91 3) PLACE A RIG ON WELL 4) PULL 3241' OF 2 3/8" TBG 5) CHECK CONDITION OF HOLE 6) ATTEMPT TO PULL 3234' OF 4 1/2" PROD CSG 7) PULL 1293' OF 7" INTERMED CSG 8) RUN CBL ON 9 5/8" SURF CSG 8) MEET W/FIELD ENGINEER OF COGCC TO CONFER WITH RESULTS OF WORK TO DATE 9) IF NO CMT ON 9 5/8" SURF CSG RECOMMEND a) PULL 9 5/8" SURF CSG b) REAM HOLE TO A SIZE OF 12 1/4" TO A DEPTH OF 100 BELOW THE FRESH WATER AQUIFER (CURRENTLY ESTIMATED TO BE 275') c) RUN 9 5/8" SURF CSG TO 275 AND CMT TO SURFACE d) DRIG OUT CMT AND REAM HOLE TO A SIZE OF 8 3/4" TO A DEPTH OF 1350' e) RUN 7" INTERMED CSG AND CMT TO SURFACE f) DRIG OUT CMT AND REAM HOLE TO A SIZE OF 6 1/4" TO A DEPTH OF 3301' g) RUN 4 1/2" PROD CSG AND CMT UP TO 200 ABOVE THE SHALLOWEST KNOWN PRODUCING INTERVAL 10) IF GOOD CMT ON 9 5/8" SURF CSG RECOMMEND a) REAM HOLE TO A SIZE OF 8 3/4" TO A DEPTH OF 1350 b) RUN 7" INTERMED CSG AND CMT TO SURFACE c) DRIG OUT CMT AND REAM HOLE TO A SOZE OF 6 1/4" TO A DEPTH OF 3301 d) RUN 4 1/2 ORID CSG AND CMT UP TO 200 ABOVE THE SHALLOWEST KNOWN PRODUCING INTERVAL 11) INTALLL PRODUCTION FACILLITY AND EQUIPMENT 12) PRODUCE HYDROCARBONS GATHER PRESSURES ANALYZE HYDROCARBONS COMPOENTS INSTITUTE STIMULATION PROCEDURES

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
Surface String	12	1		4	9	5		8	40	0	302		302	0
First String	8	3		4	7				23	0	1350		1350	0
Second String	6	1		4	4	1		2	10.50	0	3301		3301	1850

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:

Best Management Practices

No BMP/COA Type

Description

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: TOM STOVER

Title: OIL AND GAS PROPERTY MANA _____ Email: TSTOVER0807@COMCAST.NET Date: 8/12/2013

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

COGCC Approved: COLER, LARRY _____

Date: 8/21/2013

CONDITIONS OF APPROVAL, IF ANY:

COA Type

Description

	<p>If operator determines that the existing surface casing will be removed then operator shall follow statewide groundwater baseline sampling required by rule 609 prior to removing the casing.</p> <p>Initial baseline samples and subsequent monitoring samples shall be collected from all Available Water Sources, up to a maximum of four (4), within a one-half (1/2) mile radius of the Oil and Gas Well (Taylor 3 T3-4 067-06777). If more than four (4) Available Water Sources are present within a one-half (1/2) mile radius of a proposed Oil and Gas Well, the operator shall select the four sampling locations based on criteria set forth in Rule 609.</p> <p>Copies of all final laboratory analytical results shall be provided to the Director and the water well owner or landowner within three (3) months of collecting the samples. The analytical results, the surveyed sample Water Source locations, and the field observations shall be submitted to the Director in an electronic data deliverable format.</p>
	<p>1) Provide at least 48 hour notice of MIRU. Call Mark Weems at (970) 749-0624 or email Mark.Weems@state.co.us</p> <p>2) Run a CBL on the production casing from TD to surface</p> <p>3) Fugitive dust from air drilling must not leave the location and must be contained (rule 805 (c))</p> <p>4) Any earthen pits lined or otherwise will require a form 2A and a minimum 20 day comment period.</p> <p>5) Plugging back and re-completing to a shallower formation will require an approved form 2 - APD and a minimum 20 day comment period before commencing.</p> <p>6) If the existing surface casing is indeed pulled, the replacement casing must be run to a depth of 302' and cemented to surface.</p>

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>
2167190	FORM 4 SUBMITTED
2167191	WELLBORE DIAGRAM
2167192	LOCATION PICTURES
2518557	OPERATIONS SUMMARY

Total Attach: 4 Files