

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: <u>1953120</u>			
Date Received: <u>08/13/2013</u>			

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: 90615 Contact Name R. REEVE

Name of Operator: TUDEX PETROLEUM INC Phone: (360) 683-3385

Address: UNIT E 2121 39TH AVENUE NE Fax: (360) 683-3803

City: CALGARY State: AB Zip: T2E 6R7 Email: RROBERT169@QWEST.NET

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 001 08162 00 OGCC Facility ID Number: 202757

Well/Facility Name: CROFF Well/Facility Number: 12-5

Location QtrQtr: SWNE Section: 12 Township: 1S Range: 68W Meridian: 6

County: ADAMS Field Name: SPINDLE

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 SWNE Sec 12

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	
1980	FNL	1880	FEL
Twp 1S	Range 68W	Meridian 6	
Twp	Range	Meridian	
			**
Twp	Range		
Twp	Range		
			**
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>

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 CROFF Number 12-5 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 07/16/2013

☐ 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>MECHANICAL INTERRITY</u> | <input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases | |

COMMENTS:

INTEGRITY TEST TO BE PERFORMED AS PER REQUEST LETTER, DATED JULY 26/13, TO LIONEL CONN, PRESIDENT OF TUDEX PETROLEUMS INC FROM MICHAEL J HICKEY, ENGINEER, COLORADO OIL & GAS CONSERVATION COMMISSION.

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:

Best Management Practices

<u>No</u>		<u>BMP/COA Type</u>	<u>Description</u>

Operator Comments:**CROFF # 12-5 PROPOSED INTEGRITY PRESSURE TEST PROCEDURE**

- 1) PULL TUBING
- 2) TRIP IN HOLE WITH PACKER AND TUBING
- 3) SET PACKER AT 4800' (APPROX. 100' ABOVE TOP SUSSEX PERFORATION)
- 4) FILL ANNULUS WITH CRUDE OIL
- 5) PRESSURE TEST TUBING/PRODUCTION CASING ANNULUS TO 400 PSI
- 6) ASSUMING THAT THE ANNULUS HOLDS THE TEST PRESSURE, RELEASE PACKER, AND SWAB TO RECOVER LOAD OIL.
- 7) TRIP OUT TUBING & PACKER
- 8) RE-RUN TUBING AND RETURN WELL TO PLUNGER-LIFT PRODUCTION

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

Signed: _____ Print Name: RORSERT REEVE
Title: CONSULTING Email: RROBERT169@QWEST.NET Date: 8/8/2013
ENGINEER

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

COGCC Approved: WESTERDALE, BARBARA Date: 10/31/2013

CONDITIONS OF APPROVAL, IF ANY:**COA Type****Description**

	If COGCC staff is to witness an MIT, the operator is required to provide two (2) copies of the Form 21 Mechanical Integrity Test, one for each party. The header panel, "reasons" panel, and pre-test well configuration information (Injection/Producing Zone (s), Perforated Interval, etc.) should already be filled out. The Test Data panel (and Part II as needed) will be filled in by the inspector. The two (2) copies of the Form 21 should be signed by both parties. For witnessed MITs, pressure recordings are not required but are recommended.
	Operators must provide COGCC staff ten (10) days notice prior to an MIT (Rule 316B and Rule 326.c) through submission of a Form 42. Operators are expected to contact COGCC staff to update them of changes in the scheduling of an MIT after a Form 42 has been submitted.
	If an MIT is not witnessed by COGCC, the operator is required to file a Form 21 and an original pressure chart (Rule 316B) within thirty (30) days of the test. The chart may be a circular recording set with an appropriate rotation rate (clock rate one (1) revolution per hour is appropriate) and pressure range. For example; a zero to ten thousand (0-10,000) psi pressure range is not appropriate for a three hundred (300) psi pressure test. The chart should include the pressure run up from zero (0) psi, the test itself, and pressure run down to zero (0) psi.

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Form 1A approved for designation of agent for R. Reeve.	10/31/2013 1:05:42 PM
Permit	Req'd form 1A for designation of agent.	9/17/2013 3:34:56 PM

Total: 2 comment(s)

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
1953120	FORM 4 SUBMITTED
1953121	CORRESPONDENCE

Total Attach: 2 Files