

FORM

4

Rev 04/13



DE	ET	OE	ES
Document Number: 400535766			
Date Received:			

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: 100322

Contact Name MARI CLARK

Name of Operator: NOBLE ENERGY INC

Phone: (303) 228-4413

Address: 1625 BROADWAY STE 2200

Fax: (303) 228-4286

City: DENVER

State: CO

Zip: 80202

Email: mclark@nobleenergyinc.com

Complete the Attachment Checklist

OP OGCC

API Number : 05- 123 38649 00

OGCC Facility ID Number: 435545

Well/Facility Name: Wells Ranch

Well/Facility Number: AE30-66-1ANHC

Location QtrQtr: SWNW

Section: 29

Township: 6N

Range: 62W

Meridian: 6

County: WELD

Field Name: WATTENBERG

Federal, Indian or State Lease Number:

Survey Plat

Directional Survey

Srfc 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 SWNW

Sec 29

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 30

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 25

Twp 6N

Range 63W

New Bottomhole Location

Sec

Twp

Range

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

2034

FNL

65

FWL

2142

FNL

630

FEL

2145

FNL

385

FEL

Twp 6N

Range 62W

Meridian 6

Twp

Range

Meridian

Twp 6N

Range 62W

Meridian

Twp

Range

Meridian

** attach deviated drilling plan

Date Run: 1/7/2014 Doc [#400535766]

Page 1 of 4

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

OTHER CHANGES			
<input type="checkbox"/>	REMOVE FROM SURFACE BOND	Signed surface use agreement is a required attachment	
<input checked="" type="checkbox"/>	CHANGE OF WELL, FACILITY OR OIL & GAS LOCATION NAME OR NUMBER		
From:	Name	WELLS RANCH	Number AE30-66-1ANHC Effective Date: 01/02/2014
To:	Name	WELLS RANCH	Number AE30-66-1AHNC
<input type="checkbox"/>	ABANDON PERMIT: Permit can only be abandoned if the permitted operation has NOT been conducted. Field inspection will be conducted to verify site status.		
<input type="checkbox"/>	WELL: Abandon Application for Permit-to-Drill (Form2) – Well API Number has not been drilled.		
<input type="checkbox"/>	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)		
<input type="checkbox"/>	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:			
<input type="checkbox"/>	Abandon Oil & Gas Location Assessment (Form 2A) – Location has not been constructed and site will not be used in the future.		
<input type="checkbox"/>	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.			
<input type="checkbox"/>	REQUEST FOR CONFIDENTIAL STATUS		
<input type="checkbox"/>	DIGITAL WELL LOG UPLOAD		
<input type="checkbox"/>	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 _____

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

COMMENTS:

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.):

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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:

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Best Management Practices

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

Operator Comments:

Noble also requests approval to change the name to better reflect our naming convention.
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I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: Mari Clark

Title: Regulatory Analyst III Email: regulatorynotification@nobleenergyinc.co 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:

<u>COA Type</u>	<u>Description</u>

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	