

FORM

4

Rev
04/13



DE	ET	OE	ES
Document Number: 400566002			
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: 100185	Contact Name Nathan Fons	<div>Complete the Attachment Checklist</div> <div>OP OGCC</div>
Name of Operator: ENCANA OIL & GAS (USA) INC	Phone: (303) 5137504	
Address: 370 17TH ST STE 1700	Fax: ()	
City: DENVER State: CO Zip: 80202-5632	Email: nathan.fons@encana.com	
API Number : 05- 123 38000 00	OGCC Facility ID Number: 434172	Survey Plat
Well/Facility Name: Jillson-East Rinn	Well/Facility Number: 3A-22H-M268	Directional Survey
Location QtrQtr: SWSW Section: 22 Township: 2N Range: 68w Meridian: 6		Srvc Eqpmt Diagram
County: WELD Field Name: WATTENBERG		Technical Info Page
Federal, Indian or State Lease Number:		Other

GROUND WATER SAMPLING

Uses of Ground Water Sampling Section

Request an Exception to Ground Water Sampling Requirements in Greater Wattenberg Area Rule 318A.e(4) or in Statewide Rule 609.c. Request a Previously Sampled Water Source in the COGIS database be used to meet sampling requirements as described in Rule 609.d.(3).

NOTE: If this Sundry Notice is being submitted to request a Ground Water Sampling Exception it cannot be used for any other purpose except requesting the use of a Previously Sampled Water Source in the COGIS database.

- ☒ Request an Exception to Ground Water Sampling Requirements per Greater Wattenberg Area Rule 318A.e(4):There are no Available Water Sources located within the governmental quarter section or within a previously unsampled governmental quarter section within a ½-mile radius of this proposed Oil and Gas Well, Multi-Well Site, or Dedicated Injection Well.
- ☐ Request an Exception to Ground Water Sampling Requirements per Statewide Rule 609.c.

Number of Water Sources located within one-half (1/2) mile of a proposed Oil and Gas Well, Multi-Well Site, or Dedicated Injection Well.

Number of Water Source Exceptions requested per Rule 609.c.

Number of Water Sources determined to be unsuitable. **The condition of these Water Sources MUST be documented in the comments below or in an attachment.**

Number of Water Sources suitable for testing whose owners refused to grant access despite an operator's reasonable good faith efforts to obtain consent to conduct sampling. **The reasonable good faith efforts used to obtain access from the owners of these Water Sources MUST be documented in the comments below or in an attachment.**
- ☐ Request a Previously Sampled Water Source in the COGIS database be used to meet sampling requirements as described in Rule 609.d(3)

Type of Sample Substitution Request

Enter Sample ID Number from COGIS Maps for each Previous Water Sample:

Sample ID	Facility ID	Sample Date	Sample Purpose

COMMENTS

All water well owners within 1/4 sections 1/2 mile of the drilling location were sent sampling requests.
A list of the water wells and owners contacted is attached.

This exception is for the following wells:

Jillson-East Rinn 3A-22H-M268 05-123-38000
Jillson-East Rinn 3B-22H-M268 05-123-37999
Jillson-East Rinn 3C-22H-M268 05-123-37998
Jillson-East Rinn 3D-22H-M268 05-123-38001
Jillson-East Rinn 3E-22H-N268 05-123-38002
Jillson-East Rinn 3F-22H-N268 05-123-38003
Jillson-East Rinn 3G-22H-N268 05-123-38004
Jillson-East Rinn 3H-22H-N268 05-123-38005

Operator Comments:

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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: Nathan Fons
Title: Env. Coordinator Email: nathan.fons@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:**COA Type****Description**

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General Comments**User Group****Comment****Comment Date**

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Total: 0 comment(s)

Attachment Check List**Att Doc Num****Name**

400566017	WATER ANALYSIS
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Total Attach: 1 Files