

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



DE	ET	OE	ES
Document Number: 400755662			
Date Received: 12/18/2014			

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: <u>10439</u>	Contact Name <u>CYNTHIA PINEL</u>
Name of Operator: <u>CARRIZO NIOBRARA LLC</u>	Phone: <u>(713) 358-6210</u>
Address: <u>500 DALLAS STREET #2300</u>	Fax: <u>()</u>
City: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77002</u>	Email: <u>CYNTHIA.PINEL@CRZO.NET</u>

API Number : <u>05-123-40496-00</u>	OGCC Facility ID Number: <u>439574</u>
Well/Facility Name: <u>SHULL</u>	Well/Facility Number: <u>8-25-9-60</u>
Location QtrQtr: <u>SWSE</u> Section: <u>25</u> Township: <u>9N</u> Range: <u>60W</u> Meridian: <u>6</u>	
County: <u>WELD</u> Field Name: <u>WILDCAT</u>	
Federal, Indian or State Lease Number: <u></u>	

Complete the Attachment
Checklist

OP OGCC

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 40.714690 PDOP Reading 1.9 Date of Measurement 09/17/2014
Longitude -104.036100 GPS Instrument Operator's Name MARC WOODARD

LOCATION CHANGE (all measurements in Feet)

Well will be: HORIZONTAL (Vertical, Directional, Horizontal)

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

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

Current **Surface** Location **From** QtrQtr SWSE Sec 25

New **Surface** Location **To** QtrQtr SWSE Sec 25

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 25

New **Top of Productive Zone** Location **To** Sec 25

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

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

Current **Bottomhole** Location Sec 25 Twp 9N

New **Bottomhole** Location Sec 25 Twp 9N

Is location in High Density Area? No

Distance, in feet, to nearest building 3584, public road: 3715, above ground utility: 3584, railroad: 5280,

property line: 265, lease line: 300, well in same formation:

Ground Elevation 4887 feet Surface owner consultation date

FNL/FSL		FEL/FWL	
<u>265</u>	<u>FSL</u>	<u>1599</u>	<u>FEL</u>
<u>265</u>	<u>FSL</u>	<u>1599</u>	<u>FEL</u>
Twp <u>9N</u>	Range <u>60W</u>	Meridian <u>6</u>	
Twp <u>9N</u>	Range <u>60W</u>	Meridian <u>6</u>	
<u>600</u>	<u>FSL</u>	<u>2269</u>	<u>FEL</u>
<u>300</u>	<u>FSL</u>	<u>2266</u>	<u>FEL</u> **
Twp <u>9N</u>	Range <u>60W</u>		
Twp <u>9N</u>	Range <u>60W</u>		
<u>600</u>	<u>FNL</u>	<u>2314</u>	<u>FEL</u>
<u>300</u>	<u>FNL</u>	<u>2317</u>	<u>FEL</u> **

** 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>
NIOBRARA	NBRR	535-583	640	SEC 25: ALL

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 SHULL Number 8-25-9-60 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 02/01/2015

☐ 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 checked="" 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:

WE ARE REQUESTING APPROVAL TO CHANGE THE UNIT BOUNDARIES FROM 600' TO 300' AS APPROVED ON DECEMBER 15, 2014 PER DOCKET ORDER NUMBER 1412-AW-32. A REQUEST TO THE HEARINGS GROUP AT COGCC WAS SENT BY BARBRARA WESTERDALE ON 12/17/2014 FOR A SPACING ORDER NUMBER.

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
Conductor casing	18				16				75	0	65	8	65	0
Surface String	12	1		4	9	5		8	36	0	1400	545	1400	0
First String	8	3		4	7				23	0	6400	435	6400	
1ST LINER	6	1		8	4	1		2	11.6	0	10835	341	10835	5096

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:

COGCC FACILITY NUMBER SHOWED INCORRECT ON THE FORM WHEN API WAS ENTERED. THE CORRECT LOCATION ID FOR THIS WELL IS 432177. WE ARE REQUESTING APPROVAL TO CHANGE THE UNIT BOUNDARIES FROM 600' TO 300' AS APPROVED ON DECEMBER 15, 2014 PER DOCKET ORDER NUMBER 1412-AW-32. A REQUEST TO THE HEARINGS GROUP AT COGCC WAS SENT BY BARBRARA WESTERDALE ON 12/17/2014 FOR A SPACING ORDER NUMBER.

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

Signed: _____ Print Name: CYNTHIA PINEL
Title: REGULATORY COMP. ANALYST Email: CYNTHIA.PINEL@CRZO.NET Date: 12/18/2014

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

COGCC Approved: SUTPHIN, DIRK Date: 1/30/2015

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

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

Permit	Changed TD in Well Updated. Imported corrected directional data.	1/28/2015 9:55:28 AM
Permit	Returned to draft: Xcel template incorrect. Need casing and formation tab completed.	12/22/2014 7:52:15 AM
Permit	Oper. reducing unit setbacks. Need signed/approved spacing order from Hearings.	12/21/2014 3:13:34 PM

Total: 3 comment(s)

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

2451193	WELL LOCATION PLAT
2451194	DEVIATED DRILLING PLAN
400755662	FORM 4 SUBMITTED
400782241	DIRECTIONAL DATA

Total Attach: 4 Files