

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
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DE	ET	OE	ES
Document Number: 400753373			
Date Received: 12/16/2014			

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: 10456 Contact Name SHAUNA DEMATTEE
 Name of Operator: CAERUS PICEANCE LLC Phone: (720) 299-4495
 Address: 600 17TH STREET #1600N Fax: ()
 City: DENVER State: CO Zip: 80202 Email: sdemattee@progressivepcs.net

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 045 22631 00 OGCC Facility ID Number: 439883
 Well/Facility Name: Puckett Well/Facility Number: 13B-1
 Location QtrQtr: 66 Section: 2 Township: 7S Range: 97W Meridian: 6
 County: GARFIELD Field Name: WILDCAT
 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 (Vertical, Directional, Horizontal)

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

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

Current **Surface** Location **From** QtrQtr 66 Sec 2

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 1

New **Top of Productive Zone** Location **To** Sec 2

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

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

Current **Bottomhole** Location Sec 1 Twp 7S

New **Bottomhole** Location Sec 2 Twp 7S

Is location in High Density Area? No

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

property line: 4659, lease line: 700, well in same formation: 7

Ground Elevation _____ feet Surface owner consultation date 09/29/2014

FNL/FSL		FEL/FWL	
<u>2229</u>	<u>FNL</u>	<u>625</u>	<u>FEL</u>
Twp <u>7S</u>	Range <u>97W</u>	Meridian <u>6</u>	
Twp _____	Range _____	Meridian _____	
<u>2130</u>	<u>FSL</u>	<u>886</u>	<u>FWL</u>
<u>2229</u>	<u>FNL</u>	<u>625</u>	<u>FEL</u> **
Twp <u>7S</u>	Range <u>97W</u>		
Twp <u>7S</u>	Range <u>97W</u>		
<u>2130</u>	<u>FSL</u>	<u>886</u>	<u>FWL</u>
<u>2229</u>	<u>FNL</u>	<u>625</u>	<u>FEL</u> **
Twp _____	Range <u>97W</u>		
Twp _____	Range <u>97W</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>
OHIO CREEK	OHCRK	UNPSACED	640	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 PUCKETT Number 13B-1 Effective Date: 12/16/2014

To: Name PUCKETT SWD Number H2 797

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 12/16/2014

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:

Caerus is proposing to convert the subject well to a vertical, Class II disposal well to inject into the Ohio Creek formation (Injection Perfs from approximately 5900' to 6000'). To correspond with the new TD (6828' TD/MD), please refer to the updated casing and cement program. Top of production cement planned for approximately 500' inside 9 5/8" surface casing or +/- 2000'.

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	30				20				52.8#	0	84	196	84	0
Surface String	16				9	5		8	36#	0	2500	1533	2500	0
First String	8	3		4	5	1		2	15.5#	0	6828	843	6828	2000

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:

<u>Best Management Practices</u>	
<u>No BMP/COA Type</u>	<u>Description</u>

Operator Comments:

This Form 4 Sundry is being submitted to modify the well name to Puckett SWD H2 797, BHL and TD for the subject well. Caerus is proposing to convert the subject well to a vertical, Class II disposal well to inject into the Ohio Creek formation. There will be no changes to the mineral lease. The required Form 31 and Form 33 will be submitted at a later date. The distance to nearest well in the same formation was measured from SHL to the proposed Puckett 13A-1 well. Please see revised well location plat attached.

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

Signed: _____ Print Name: SHAUNA DEMATTEE
 Title: Regulatory Analyst Email: sdemattee@progressivepcs.net Date: 12/16/2014

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

COGCC Approved: KOEHLER, BOB Date: 2/13/2015

CONDITIONS OF APPROVAL, IF ANY:

COA Type

Description

	<ol style="list-style-type: none"> 1. Injection is not authorized until approval of Forms 31 and 33. 2. Prior approval of Form 4 is required for step rate and injectivity tests. 3. A Transient Injectivity Test is required to determine the Maximum Daily Injection Rate in barrels per day (bbls/day). 4. A Transient Injectivity Test or a Step Rate Test is required to determine the Maximum Injection Pressure in pounds per square inch (psi). 5. Retrieve water sample(s) from injection zone(s) before stimulating formation. Samples must be analyzed for Total Dissolved Solids at a minimum. 6. For all new drill Underground Injection Control wells a suite of open-hole Resistivity/Gamma Ray and Density/Neutron logs is required from Surface Casing shoe to TD. A PDF, TIFF, or PDS visual image and a LAS or DILS file version of each log is required. 7. For all new and converted Underground Injection Control wells a Cement Bond Log (CBL) is a required on the cased portions of the hole from the bottom of the casing to the top of the next shallower casing string for all casing strings other than the Surface Casing. Only a PDF, TIFF, or PDS visual image is required., LAS format is appreciated-not required. 8. Operator must provide all tops of formations encountered from surface to TD on the Form 5 when submitted.
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General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
UIC	Forms 31 (Doc # 2494387) and 33 (Doc # 2494386) submitted 1/28/2015. Wellbore diagram received 2/13/2015.	2/13/2015 9:12:05 AM
Engineer	Permitted wellbores in the area have a condition of approval attached to the APD that cement coverage be 200' above the Ohio Creek formation. Area review needed for existing wells.	12/17/2014 2:43:34 PM
Permit	Opr is having a well bore diagram done and will attach it to the forms 31 & 33.	12/17/2014 11:11:47 AM

Total: 3 comment(s)

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
2618316	WELLBORE DIAGRAM-PROPOSED
400753373	FORM 4 SUBMITTED
400753439	WELL LOCATION PLAT

Total Attach: 3 Files