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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: <div>8960</div> Contact Name <div>Brian Dodek</div>	<div>Complete the Attachment Checklist</div> <div>OP OGCC</div>
Name of Operator: <div>BONANZA CREEK ENERGY OPERATING COMPANY LLC</div> Phone: <div>(720) 225-6653</div>	
Address: <div>410 17TH STREET SUITE #1400</div> Fax: <div>()</div>	
City: <div>DENVER</div> State: <div>CO</div> Zip: <div>80202</div> Email: <div>bdodek@bonanzacrk.com</div>	
API Number : <div>05-123 41371 00</div> OGCC Facility ID Number: <div>441374</div>	Survey Plat
Well/Facility Name: <div>Antelope</div> Well/Facility Number: <div>E-A-21HNB</div>	Directional Survey
Location QtrQtr: <div>SWSW</div> Section: <div>21</div> Township: <div>5N</div> Range: <div>62W</div> Meridian: <div>6</div>	Srvc Eqpmt Diagram
County: <div>WELD</div> Field Name: <div>WATTENBERG</div>	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

Bonanza conducted research to verify the presence of a representative well sample (attached). Two stock wells were identified in the DWR research; however, a field visit confirmed both wells no longer exist.

Operator Comments:

The exemption request includes the following wells:

05-123-41371 ANTELOPE E-A-21HNB
05-123-41372 STATE ANTELOPE E14-21-16XRLNC
05-123-41370 STATE ANTELOPE 14-21-16XRLNB
05-123-41373 STATE ANTELOPE J14-21-16XRLNC

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

Signed: _____ Print Name: Brian Dodek

Title: Sr Env Specialist Email: bdodek@bonanzacrk.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:**Attachment Check List**

<u>Att Doc Num</u>	<u>Name</u>
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400827137	OTHER
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Total Attach: 1 Files