

# State of Colorado Oil and Gas Conservation Commission

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DE	ET	OE	ES
Document Number: <b>400786466</b>			
Date Received: <b>02/09/2015</b>			

## 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>100185</u>	Contact Name <u>AMY HENLINE</u>	Complete the Attachment Checklist  OP OGCC
Name of Operator: <u>ENCANA OIL &amp; GAS (USA) INC</u>	Phone: <u>(720) 876-3364</u>	
Address: <u>370 17TH ST STE 1700</u>	Fax: <u>( )</u>	
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202-5632</u> Email: <u>AMY.HENLINE@ENCANA.COM</u>		
API Number : <u>05-04500</u> OGCC Facility ID Number: <u>324378</u>	Survey Plat	
Well/Facility Name: <u>FEDERAL-68S97W</u> Well/Facility Number: <u>12SWNE</u>	Directional Survey	
Location QtrQtr: <u>SWNE</u> Section: <u>12</u> Township: <u>8S</u> Range: <u>97W</u> Meridian: <u>6</u>	Srvc Eqpmt Diagram	
County: <u>GARFIELD</u> Field Name: <u>GRAND VALLEY</u>	Technical Info Page	
Federal, Indian or State Lease Number: _____	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 SWNE Sec 12

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 \_\_\_\_\_

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 \_\_\_\_\_ Twp \_\_\_\_\_

New **Bottomhole** Location Sec \_\_\_\_\_ Twp \_\_\_\_\_

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	
1557	FNL	2063	FEL
Twp <u>8S</u>	Range <u>97W</u>	Meridian <u>6</u>	
Twp _____	Range _____	Meridian _____	
			**
Twp _____	Range _____		
Twp _____	Range _____		
			**

\*\* attach deviated drilling plan

## 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 FEDERAL-68S97W Number 12SWNE 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 \_\_\_\_\_

☐ 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:

## 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:

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**Best Management Practices****No BMP/COA Type****Description**

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## Operator Comments:

In response to Inspection No. 675201043, Encana Oil and Gas (USA) Inc. has reviewed the corrective action items "lines and concrete pad, remove per COGCC rules" & "location is rutted at tank containment. - Use BMPs to address" for LOCATION ID #324378.

In regards to the first corrective action item mentioned above, the lines and concrete pads were utilized by an onsite compression unit which was installed at this location. Encana Oil and Gas (USA) Inc. is currently evaluating the production potential at this location, and whether the need for onsite compression will be required in the future. Encana requests that the lines and concrete pads remain on location until the production requirement for the compressor unit has been determined. If onsite compression is not necessary, the lines and concrete pads will be removed to satisfy the corrective action. By leaving the lines and concrete pads on location, Encana would reduce any unnecessary surface disturbance that would occur if the compression unit were to be deemed necessary for production operations, and reinstalled at this location.

Regarding the second corrective action item above, the use of BMPs to address rutting on location at the tank containment, Encana Oil and Gas (USA) Inc. will address the rutted area present on location near the tank containment as soon as practicable after the spring 2015 thaw and run-off. Specifically, after spring run-off and the location surfaces dry, Encana will use general blading on the location to eliminate ruts. Additionally, Encana will inspect the location and make necessary improvements to the existing surface BMP's currently in use on the location.

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

Signed: \_\_\_\_\_ Print Name: AMY HENLINE  
 Title: REGULATORY ANALYST Email: AMY.HENLINE@ENCANA.COM Date: 2/9/2015

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

COGCC Approved: CONKLIN, CURTIS Date: 9/30/2015

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

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

Routing Review	Routed to the the Field Inspection Group (C. Conklin and S. Kellerby) for review.	2/9/2015 8:20:14 AM
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Total: 1 comment(s)

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

400786466	FORM 4 SUBMITTED
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Total Attach: 1 Files