

**State of Colorado
Oil and Gas Conservation Commission**

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



FOR OGCC USE ONLY

Document Number:
400971086

Date Received:

INJECTION WELL PERMIT APPLICATION

Submit a completed Form 33 with or after approval obtained on Form 31 (Underground Injection Formation Permit Application) or you must have a previously approved injection Well Permit.

- Operator may not commence injection into this well until this form is approved.
- Each individual injection well must be approved by this form.

Per Rule 325, this form shall be submitted with all required attachments.
 A Form 33 – Intent shall be submitted and approved prior to completing an injection zone.
 A Form 33 – Subsequent shall be submitted following completion of the well and must be approved prior to injection.
 NOTE: Injection for Enhanced Recovery requires the field to be unitized according to the 400 Series Rules. Injection for Disposal into a producing field requires unitization of the formation in the field.

Form 33 Type Intent Subsequent

OPERATOR INFORMATION

OGCC Operator Number: <u>10456</u>	Contact Name and Telephone:
Name of Operator: <u>CAERUS PICEANCE LLC</u>	Name: <u>Reed Haddock</u>
Address: <u>600 17TH STREET #1600N</u>	Phone: <u>(720) 880-6369</u> Fax: <u>(303) 565-4606</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>rhaddock@caerusoilandgas.com</u>

WELL INFORMATION

Well Name and Number: Savage 8A-794-SWD API No: 05- - -00

Field Name and Number: RULISON 75400 County: GARFIELD

QtrQtr: NWNE Sec: 8 Twp: 7S Range: 94W Meridian: 6

UIC FACILITY INFORMATION

UIC Facility ID: _____ (as assigned on an approved Form 31)

Facility Name: _____ Facility Number: _____

WELLBORE INFORMATION

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top	Status
CONDUCTOR	26	16	52.8#	0	60	110	60	0	CALC
SURF	13+1/2	9+5/8	36#	0	2500	335	2500	0	CALC
1ST	8+3/4	7	26#	0	6000	1600	6000	1500	CBL

Plug Back Total Depth: 6000 Tubing Depth: 5000 Packer Depth: 5000

List below all Plugs, Bridge Plugs, Stage Cementing or Squeeze Work performed on this wellbore:

Proposed wellbore is to perforate Ohio Creek interval (geoprog estimated top: 5068'). The Ohio Creek Interval in offset wellbores have an estimated gross interval of 200'. Caerus will run logs to evaluate specific injection perforations. Note: perforations shown in Completions section of this Form 33 are PROPOSED. Once identified, perforations and swab test will be conducted to gather formation water sample. A step rate test will also be performed to determine maximum allowable injection pressure. The well will be completed and 4.5" coated tubing will be landed with a production packer 50' above top perf. An MIT will be performed to confirm isolation and integrity.

Describe below any changes to the wellbore which will be made upon conversion (includes but not limited to changes of tubing and packer setting depths, any additional squeeze work for aquifer protection or casing leaks, setting of bridge plugs to isolate non-injection formations).

WELLBORE COMPLETIONS

Formation Name	Gross Completed Interval from Top	Gross Completed Interval from Bottom	Completion Type
OHIO CREEK	5068	5268	Perforated

Operator Comments:

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

Print Name: Reed Haddock

Signed: _____ Title: Sr. Regulatory Specialist Date: _____

OGCC Approved: _____ Title: _____ Date: 1/14/2016 8:09:34 AM

MAX. SURFACE INJECTION PRESSURE: _____ If Disposal Well, MAX. INJECTION VOL. LIMIT: _____

CONDITIONS OF APPROVAL, IF ANY:

COA Type	Description

Attachment Check List

Att Doc Num	Name
400992270	WELLBORE DIAGRAM-PROPOSED

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)