

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: 401098034			
Date Received: 08/24/2016			

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: 10421 Contact Name Rick Obernolte
 Name of Operator: PETROLEUM RESOURCE MANAGEMENT CORP. Phone: (303) 660-9633
 Address: 1580 LINCOLN ST., STE 635 Fax: ()
 City: DENVER State: CO Zip: 80203 Email: rickobe1@aol.com

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 081 07799 00 OGCC Facility ID Number: 436484
 Well/Facility Name: Duncan Ranch Well/Facility Number: 11-89-36 #3-4
 Location QtrQtr: Lot 19 Section: 36 Township: 11N Range: 89W Meridian: 6
 County: MOFFAT 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, Directional, Horizontal)

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

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

Current **Surface** Location **From** QtrQtr Lot 19 Sec 36

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	
<u>728</u>	<u>FSL</u>	<u>2409</u>	<u>FEL</u>
_____	_____	_____	_____
Twp <u>11N</u>	Range <u>89W</u>	Meridian <u>6</u>	
Twp _____	Range _____	Meridian _____	
_____	_____	_____	_____
_____	_____	_____	_____
Twp _____	Range _____		
Twp _____	Range _____		
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**

**

** attach deviated drilling plan

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 09/15/2016

REPORT OF WORK DONE Date Work Completed _____

<input type="checkbox"/> Intent to Recomplete (Form 2 also required)	<input checked="" 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:

The alternatives estimates presented in the previous Form 4 (#401039188) are still valid for gas processing, electric generation, and natural gas pipeline. The operator would like to continue producing the well for an additional 24 months. The current estimate of daily gas production is 140 MCF/day assuming no decline. which at the current CIG Inside FERC price of \$1.75/MCF yields a flaring cost of \$245/day. During the period from 10/16 to 3/17 the well will produce approximately 8,400 MCF because it will likely operate for 2 months and be shut infor 4 months due to winter conditions. During the period from 4/17 to 9/17 the well should produce approximately 25,200 MCF. During the period from 10/17 to 3/18 it should produce 8,400 MCF and from 4/18 to 9/18 it should produce 25,200 MCF. Total cost for the two years is estimated to be \$117,600.

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

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</u>	<u>BMP/COA Type</u>	<u>Description</u>

Operator Comments:

Related forms include the original Form 4 (401039188) request to flare with the economic estimates for the potential alternatives (pipeline, electric generation, and gas processing) and Form 4 (401088062) - gas analysis. The H2S analysis (401088063) is attached to the sundry notice (401088062)

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

Signed: _____ Print Name: Rick Obernolte
Title: Agent Email: rickobe1@aol.com Date: 8/24/2016

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

COGCC Approved: BURGER, CRAIG Date: 9/12/2016

CONDITIONS OF APPROVAL, IF ANY:

COA Type

Description

	<p>1) Comply with all requirements of Rule 912, including monthly reporting of flared volumes (on Form 7) and notifications to local emergency dispatch or the local government designee.</p> <p>2) Submit annual updates (requests to flare) to COGCC on Form 4s (Sundry Notices), including all information specified in COGCC's "Notice to Operators, Rule 912 Venting or Flaring Produced Natural Gas - Statewide."</p> <p>3) Comply with any Colorado Department of Public Health and Environment, Air Pollution Control Division rules or requirements for all atmospheric discharges.</p> <p>4) An enclosed flare shall be used, unless an open flare is specifically allowed by CDPHE's Regulation 7.</p>
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General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401098034	FORM 4 SUBMITTED

Total Attach: 1 Files