





SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (Page 2 of this form.) Identify well or other facility by API Number or by OGCC Facility ID. Operator shall send an informational copy of all sundry notices for wells located in High Density Areas to the Local Government Designee (Rule 603b.)


RECEIVED
JUL 25 2008
COGCC

1. OGCC Operator Number: <u>18795</u>	4. Contact Name <u>Stephanie Clasen</u>	Complete the Attachment Checklist OP OGCC
2. Name of Operator: <u>Colton LLC</u>	Phone: <u>(303) 297-0347</u>	
3. Address: <u>621 17th Street, Suite 1520</u>	Fax: <u>303-297-9075</u>	
City: <u>Denver</u> State: <u>CO</u> Zip: <u>80293</u>		
5. API Number <u>05- 123-20231</u>	OGCC Facility ID Number	Survey Plat
6. Well/Facility Name: <u>Camenisch-UPRR</u> ✓	7. Well/Facility Number <u>6-3</u> ✓	Directional Survey
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): <u>SWNW 3, T4N, R66W, 6TH</u>		Surface Eqpm Diagram
9. County: <u>Weld</u>	10. Field Name: <u>Wattenberg</u>	Technical Info Page
11. Federal, Indian or State Lease Number:		Other

General Notice

<input type="checkbox"/> CHANGE OF LOCATION: Attach New Survey Plat (a change of surface qtr/qtr is substantive and requires a new permit)																					
Change of Surface Footage from Exterior Section Lines:	<table border="1"><tr><td></td><td>FNL/FSL</td><td></td><td>FEL/FWL</td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr></table>		FNL/FSL		FEL/FWL																
	FNL/FSL		FEL/FWL																		
Change of Surface Footage to Exterior Section Lines:																					
Change of Bottomhole Footage from Exterior Section Lines:																					
Change of Bottomhole Footage to Exterior Section Lines:																					
Bottomhole location Qtr/Qtr, Sec, Twp, Rng, Mer																					
Latitude	Distance to nearest property line																				
Longitude	Distance to nearest bldg, public rd, utility or RR																				
Ground Elevation	Distance to nearest lease line																				
	Is location in a High Density Area (rule 603b)? Yes/No																				
	Distance to nearest well same formation																				
	Surface owner consultation date:																				

GPS DATA:

Date of Measurement PDOP Reading Instrument Operator's Name

<input type="checkbox"/> CHANGE SPACING UNIT	<input type="checkbox"/> Remove from surface bond
Formation	Signed surface use agreement attached
Formation Code	
Spacing order number	
Unit Acreage	
Unit configuration	

<input type="checkbox"/> CHANGE OF OPERATOR (prior to drilling):	<input type="checkbox"/> CHANGE WELL NAME	NUMBER
Effective Date:	From:	
Plugging Bond: <input type="checkbox"/> Blanket <input type="checkbox"/> Individual	To:	
	Effective Date:	

<input type="checkbox"/> ABANDONED LOCATION:	<input type="checkbox"/> NOTICE OF CONTINUED SHUT IN STATUS
Was location ever built? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date well shut in or temporarily abandoned:
Is site ready for inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No	Has Production Equipment been removed from site? <input type="checkbox"/> Yes <input type="checkbox"/> No
Date Ready for Inspection:	MIT required if shut in longer than two years. Date of last MIT

<input type="checkbox"/> SPUD DATE:	<input type="checkbox"/> REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)
--	--

<input type="checkbox"/> SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK	*submit cbl and cement job summaries				
Method used	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom	Date

<input type="checkbox"/> RECLAMATION: Attach technical page describing final reclamation procedures per Rule 1004.	
Final reclamation will commence on approximately	<input type="checkbox"/> Final reclamation is completed and site is ready for inspection.

Technical Engineering/Environmental Notice

<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Report of Work Done
Approximate Start Date:	Date Work Completed: <u>7/24/08</u>

Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)

<input type="checkbox"/> Intent to Recomplete (submit form 2)	<input type="checkbox"/> Request to Vent or Flare	<input type="checkbox"/> E&P Waste Disposal
<input type="checkbox"/> Change Drilling Plans	<input type="checkbox"/> Repair Well	<input type="checkbox"/> Beneficial Reuse of E&P Waste
<input type="checkbox"/> Gross Interval Changed?	<input type="checkbox"/> Rule 502 variance requested	<input type="checkbox"/> Status Update/Change of Remediation Plans
<input type="checkbox"/> Casing/Cementing Program Change	<input checked="" type="checkbox"/> Other: <u>REPERF & REFRAC</u>	for Spills and Releases

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

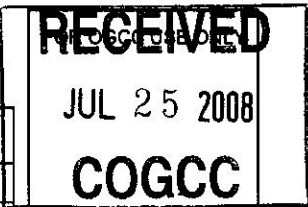
Signed: Stephanie Clasen Date: 07/22/08 Email: sovereignenergy@aol.com
Print Name: Stephanie Clasen Title: Office Manager

COGCC Approved: Diana Bui Title: ENG Date: 2/2/09

CONDITIONS OF APPROVAL, IF ANY:



TECHNICAL INFORMATION PAGE



1. OGCC Operator Number: 18795	API Number: 05-123-20231
2. Name of Operator: COLTON LLC	OGCC Facility ID #
3. Well/Facility Name: CAMENISCH-UPRR	Well/Facility Number: 6-3
4. Location (QtrQtr, Sec, Twp, Rng, Meridian): SWNW 3, T4N, R66W, 6TH	

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within 30 days of work completed as a "subsequent" report and must accompany Form 4, page 1.

5. DESCRIBE PROPOSED OR COMPLETED OPERATIONS

REPERF CODELL 7232-7242', 4SPF, .38" EHD.
REFRAC CODELL W/2790 BBLS SILVERSTIM #28 & 165,000# 30/50 SAND.