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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:	35080	Contact Name	Phyllis Brewer
Name of Operator:	GRAND MESA OPERATING CO	Phone:	(316) 265-3000
Address:	1700 N. WATERFRONT PKWY BL 600	Fax:	(316) -265-3455
City:	WICHITA	State:	KS
Zip:	67206	Email:	PBrewer@gmocks.com

API Number :	05-0730673300	OGCC Facility ID Number:	453035
Well/Facility Name:	YOSEMITE	Well/Facility Number:	1-3
Location QtrQtr:	SESE	Section:	3
		Township:	8S
		Range:	55W
		Meridian:	6
County:	LINCOLN	Field Name:	WILDCAT
Federal, Indian or State Lease Number:			

Complete the Attachment
Checklist

OP OGCC

Survey Plat		
Directional Survey		
Srfc Eqpmt Diagram		
Technical Info Page		
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.

2

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.

2

Number of Water Source Exceptions requested per Rule 609.c.

0

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.**

0

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

This form applies to the Yosemite #1-3 well (05-073-06733). Requesting an exception to groundwater sampling requirements per statewide Rule 609.c.

There are only two (2) water sources within one-half (1/2) mile of the proposed oil and gas well.

There are two (2) water source exceptions requested per Rule 609.c.

The COGCC GIS Online Interactive Map was utilized to research applicable groundwater wells.

Operator Comments:

This form applies to the Yosemite #1-3 well (05-073-06733). Requesting an exception to groundwater sampling requirements per statewide Rule 609.c.

There are only two (2) water sources within one-half (1/2) mile of the proposed oil and gas well.

There are two (2) water source exceptions requested per Rule 609.c.

The COGCC GIS Online Interactive Map was utilized to research applicable groundwater wells.

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

Signed: _____

Print Name: David Slawkowski

Title: Environmental Geologist

Email: slawkawskid@agwco.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:**COA Type****Description**

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

		Stamp Upon Approval
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Total: 0 comment(s)

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

401554393	REFERENCE AREA MAP
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Total Attach: 1 Files