

# State of Colorado Oil and Gas Conservation Commission

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## 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: 10720	Contact Name: Anders Elgerd
Name of Operator: KODA EXPLORATION LLC	Phone: (303) 915-2555
Address: 11799 WEST 18TH AVENUE	Fax: ( )
City: LAKEWOOD State: CO Zip: 80215	Email: elgerd@comcast.net

Complete the Attachment  
Checklist

OP OGCC

API Number : 05- 073 06774 00	OGCC Facility ID Number: 472941
Well/Facility Name: Roaring Fork	Well/Facility Number: 14-28
Location QtrQtr: SESW Section: 28 Township: 16S Range: 54W Meridian: 6	
County: LINCOLN Field Name: WILDCAT	
Federal, Indian or State Lease Number:	

Survey Plat		
Directional Survey		
Srvc 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.
- 0 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.
- 4 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 318A.f.(2)A. (for Initial Baseline (pre-drill) ONLY) or 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**

A review of information available on COGIS maps indicates that there is no water feature that meets the 100 series definition of a water source within 1/2 mile of the Roaring Fork 14-28 oil/gas well. Therefore, Operator is requesting an exception from the requirements of COGCC Rule 609 for the Site.

**Operator Comments:**

A review of information available on COGIS maps indicates that there is no water feature that meets the 100 series definition of a water source within 1/2 mile of the Roaring Fork 14-28 oil/gas well. Therefore, Operator is requesting an exception from the requirements of COGCC Rule 609 for the Site.

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

Signed: \_\_\_\_\_ Print Name: Christopher DelHiero  
Title: Agent Email: chris@CDHConsult.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:**

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

**General Comments**

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)

**Attachment Check List**

<u>Att Doc Num</u>	<u>Name</u>

Total Attach: 0 Files