

State of Colorado Oil and Gas Conservation Commission

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Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number: 402720840			
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: <u>10456</u>	Contact Name <u>Reed Haddock</u>
Name of Operator: <u>CAERUS PICEANCE LLC</u>	Phone: <u>(720) 880-6369</u>
Address: <u>1001 17TH STREET #1600</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>
API Number : 05- <u>045</u> <u>24331</u> <u>00</u> OGCC Facility ID Number: <u>476649</u>	
Well/Facility Name: <u>BJU G35 FED</u> Well/Facility Number: <u>12D-35-496</u>	
Location QtrQtr: <u>SWNW</u> Section: <u>35</u> Township: <u>4S</u> Range: <u>96W</u> Meridian: <u>6</u>	
County: <u>GARFIELD</u> Field Name: <u>GRAND VALLEY</u>	
Federal, Indian or State Lease Number: <u>COC061138</u>	

Complete the Attachment
Checklist

OP OGCC

Survey Plat		
Directional Survey		
Srvc 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 39.660625 GPS Quality Value: 1.6 Type of GPS Quality Value: PDOP Measurement Date: 06/14/2021
Longitude -108.134964

LOCATION CHANGE (all measurements in Feet)

Well will be: DIRECTIONAL (Vertical, Directional, Horizontal)

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

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

Current **Surface** Location **From** QtrQtr SWNW Sec 35

New **Surface** Location **To** QtrQtr SWNW Sec 35

FNL/FSL		FEL/FWL	
<u>1995</u>	<u>FNL</u>	<u>2356</u>	<u>FEL</u>
<u>1984</u>	<u>FNL</u>	<u>2366</u>	<u>FEL</u>
Twp <u>4S</u>	Range <u>96W</u>	Meridian <u>6</u>	
Twp <u>4S</u>	Range <u>96W</u>	Meridian <u>6</u>	

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 35

New **Top of Productive Zone** Location **To** Sec 35

<u>1832</u>	<u>FNL</u>	<u>490</u>	<u>FWL</u>
<u>1792</u>	<u>FNL</u>	<u>491</u>	<u>FWL</u>

**

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

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

Current **Bottomhole** Location Sec 35 Twp 4S

New **Bottomhole** Location Sec 35 Twp 4S

<u>1866</u>	<u>FNL</u>	<u>396</u>	<u>FWL</u>
<u>1826</u>	<u>FNL</u>	<u>397</u>	<u>FWL</u>

**

** attach deviated drilling plan

Is location in High Density Area? No

Distance, in feet, to nearest building 5280, public road: 2496, above ground utility: 5280, railroad: 5280,

property line: 3338, lease line: 814, well in same formation: 450

Ground Elevation 8165 feet Surface owner consultation date _____

CHANGE OR ADD OBJECTIVE FORMATION AND/OR SPACING UNIT

<u>Objective Formation</u>	<u>Formation Code</u>	<u>Spacing Order Number</u>	<u>Unit Acreage</u>	<u>Unit Configuration</u>

OTHER CHANGES

☐ **REMOVE FROM SURFACE BOND** Signed surface use agreement is a required attachment

☐ **CHANGE OF WELL, FACILITY OR OIL & GAS LOCATION NAME OR NUMBER**

From: Name BJU G35 FED Number 12D-35-496 Effective Date: _____

To: Name _____ Number _____

☐ **ABANDON PERMIT: Permit can only be abandoned if the permitted operation has NOT been conducted. Field inspection will be conducted to verify site status.**

☐ WELL: Abandon Application for Permit-to-Drill (Form2) – Well API Number _____ has not been drilled.

☐ PIT: Abandon Earthen Pit Permit (Form 15) – COGCC Pit Facility ID Number _____ has not been constructed (Permitted and constructed pit requires closure per Rule 905)

☐ **CENTRALIZED E&P WASTE MANAGEMENT FACILITY:** Abandon Centralized E&P Waste Management Facility Permit (Form 28) – Facility ID Number _____ has not been constructed (Constructed facility requires closure per Rule 908)

OIL & GAS LOCATION ID Number: _____

☐ Abandon Oil & Gas Location Assessment (Form 2A) – Location has not been constructed and site will not be used in the future.

☐ Keep Oil & Gas Location Assessment (Form 2A) active until expiration date. This site will be used in the future.

Surface disturbance from Oil and Gas Operations must be reclaimed per Rule 1003 and Rule 1004.

☐ **REQUEST FOR CONFIDENTIAL STATUS**

☐ **DIGITAL WELL LOG UPLOAD**

☐ **DOCUMENTS SUBMITTED** Purpose of Submission: _____

RECLAMATION**INTERIM RECLAMATION**

☐ Interim Reclamation will commence approximately _____

Per Rule 1003.e.(3) operator shall submit Sundry Notice reporting interim reclamation is complete and site is ready for inspection when vegetation reaches 80% coverage.

☐ Interim reclamation complete, site ready for inspection.

Per Rule 1003.e(3) describe interim reclamation procedure in Comments below or provide as an attachment and attach required location photographs.

Field inspection will be conducted to document Rule 1003.e. compliance

FINAL RECLAMATION

☐ Final Reclamation will commence approximately _____

Per Rule 1004.c.(4) operator shall submit Sundry Notice reporting final reclamation is complete and site is ready for inspection when vegetation reaches 80% coverage.

☐ Final reclamation complete, site ready for inspection. Per Rule 1004.c(4) describe final reclamation procedure in Comments below or provide as an attachment.

Field inspection will be conducted to document Rule 1004.c. compliance

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 12/01/2021

☐ REPORT OF WORK DONE Date Work Completed _____

- | | | |
|--|---|--|
| <input type="checkbox"/> Intent to Recomplete (Form 2 also required) | <input type="checkbox"/> Request to Vent or Flare | <input type="checkbox"/> E&P Waste Mangement Plan |
| <input checked="" 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"/> Bradenhead Plan | <input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases | |
| <input type="checkbox"/> Other _____ | | |

COMMENTS:

The directional plan and data have been revised along with the cement and casing design. Attached find a revised directional survey, revised excel data spreadsheet and revised Location Survey Plat. The revised TD is 11,999' MD.

CASING PROGRAM

<u>Casing Type</u>	<u>Size of Hole</u>	<u>Size of Casing</u>	<u>Grade</u>	<u>Wt/Ft</u>	<u>Csg/Liner Top</u>	<u>Setting Depth</u>	<u>Sacks Cmt</u>	<u>Cmt Btm</u>	<u>Cmt Top</u>
CONDUCTOR	30	20	A252	54#	0	100	218	100	0
SURF	14+3/4	9+5/8	J55	36#	0	3000	710	3000	0
1ST	8+3/4	4+1/2	HCP110	11.6#	0	11999	1465	11999	3000

POTENTIAL FLOW AND CONFINING FORMATIONS

<u>Zone Type</u>	<u>Formation /Hazard</u>	<u>Top M.D.</u>	<u>Top T.V.D.</u>	<u>Bottom M.D.</u>	<u>Bottom T.V.D.</u>	<u>TDS (mg/L)</u>	<u>Data Source</u>	<u>Comment</u>
Groundwater	Green River	0	0	2300	2205	501-1000	CGS	
Confining Layer	Wasatch	2641	2527	5800	5507			The Wasatch G is a non-productive zone in the referenced area of the basin.
Hydrocarbon	Wasatch G	5822	5527	6100	5790			
Confining Layer	Ft. Union	6118	5807	7500	7110			
Hydrocarbon	Ohio Creek	8216	7810	8400	7994	>10000	Produced Water Sample	
Hydrocarbon	Williams Fork	8463	8057	11200	10793	>10000	Produced Water Sample	
Hydrocarbon	Cameo	11201	10794	11700	11293	>10000	Produced Water Sample	
Hydrocarbon	Rollins	11799	11392	11999	11592	>10000	Produced Water Sample	

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:

Best Management Practices

No BMP/COA Type

Description

Operator Comments:

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

Signed: _____ Print Name: Reed Haddock
Title: Regulatory Lead Email: rhaddock@caerusoilandgas.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 List

Att Doc Num

Name

402720863	WELL LOCATION PLAT
402720864	DEVIATED DRILLING PLAN
402721967	DIRECTIONAL DATA

Total Attach: 3 Files