

State of Colorado Oil and Gas Conservation Commission

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DE	ET	OE	ES
Document Number: 401523703			
Date Received: 01/23/2018			

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: 69175 Contact Name Kelsi Welch
 Name of Operator: PDC ENERGY INC Phone: (303) 831-3974
 Address: 1775 SHERMAN STREET - STE 3000 Fax: ()
 City: DENVER State: CO Zip: 80203 Email: kelsi.welch@pdce.com

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 123 14710 00 OGCC Facility ID Number: 246913
 Well/Facility Name: MCINTOSH Well/Facility Number: 33-23
 Location QtrQtr: NWSE Section: 23 Township: 6N Range: 64W Meridian: 6
 County: WELD Field Name: WATTENBERG
 Federal, Indian or State Lease Number: 67803

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 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 NWSE Sec 23

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>1790</u>	<u>FSL</u>	<u>1980</u>	<u>FEL</u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
Twp <u>6N</u>	Range <u>64W</u>	Meridian <u>6</u>	
Twp <u> </u>	Range <u> </u>	Meridian <u> </u>	
<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
Twp <u> </u>	Range <u> </u>		
Twp <u> </u>	Range <u> </u>		
<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
Range <u> </u>			
Range <u> </u>			

**

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** attach deviated drilling plan

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 MCINTOSH Number 33-23 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 01/30/2018

☐ 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 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 checked="" type="checkbox"/> Other <u>Annular Fill</u> | <input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases | |

COMMENTS:

MCINTOSH 33-23 (05-123-14710)
PROPOSED REMEDIAL ANNULAR CEMENTING PROCEDURE

GROUND LEVEL: 4640' ORIGINAL KB: 4651' TOTAL DEPTH: 7019'
SURFACE CSG: 8 5/8" 24# set at 305'KB w/ 175 sxs
PRODUCTION CSG: 4 1/2" 11.6# set at 7019'KB w/ 250 sxs
PRODUCTION TBG: 2 3/8" 4.7# J55 set at 6960'KB
TOC: 6252'KB (calc – will need CBL verification)

- 1) MIRU WO rig. Make sure well is dead. Check bradenhead pressure.
- 2) POOH tbg.
- 3) Run CBL to verify TOC.
- 4) ND WH. RU wireline to run gauge ring/junk basket.
- 5) RIH with CIBP, set @ 6794'KB. Dump bail 2 sxs to top off plug.
- 6) RU pulling unit and spear 4 1/2" production csg to remove out of hangar.
- 7) NU annular fill flange.
- 8) TIH w/ 1 1/4" 3.02# CS Hydril stick pipe to 620'KB in production csg annular space.
- 9) RU cmt unit, pump 195 sxs then pull 1 1/4" stick pipe.
- 10) Top remaining annular volume off.
- 11) ND annular fill flange, spear to re-land csg and NU 5k WH.
- 12) Run CBL from 620'KB to surface.
- 13) TIH to hang off tbg.
- 14) RDMO WO rig.

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:

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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.):

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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:

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Best Management Practices

No BMP/COA Type

Description

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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: Kelsi Welch
Title: Production Tech Email: kelsi.welch@pdce.com Date: 1/23/2018

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

COGCC Approved: HICKEY, MIKE Date: 2/8/2018

CONDITIONS OF APPROVAL, IF ANY:**COA Type****Description**

	The additional cement referenced shall be placed as indicated. The placed cement shall be verified with a CBL and documented with a Form 5.
	Prior to initiation of repair, a bradenhead test shall be performed. 1)If, before opening the bradenhead valve, the beginning pressure is greater than 25 psi, sampling is required. 2)If pressure remains at the conclusion of the test, or if any liquids were present during the test, sampling is required. Sampling shall comply with Operator Guidance - Bradenhead Testing and Reporting Instructions, Appendix A: Liquid and Gas Sampling. The Form 17 shall be submitted within 10 days of the test. 3)Following repair, and before returning the well to production, an additional bradenhead test shall be performed. If, before opening the bradenhead valve, the beginning pressure is greater than 25 psi, sampling is required. 4)If any pressure remains at the conclusion of the test or any liquids were present sampling is required. Form 17 shall be submitted within 10 days of the test.

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**

401523703	SUNDRY NOTICE APPROVED-OTHER
401523705	GYRO SURVEY
401540949	FORM 4 SUBMITTED

Total Attach: 3 Files