

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



DE	ET	OE	ES
Document Number: 401612015			
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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: 10625 Contact Name Eric Anderson
 Name of Operator: HIGHLANDS NATURAL RESOURCES CORPORATION Phone: (303) 798 0356
 Address: 220 JOSEPHINE STREET Fax: ()
 City: DENVER State: CO Zip: 80206 Email: eric.anderson@highlandsnr.com

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 005 07342 00 OGCC Facility ID Number: 454167
 Well/Facility Name: Ouray Well/Facility Number: 5-64 15-16-1BHZ
 Location QtrQtr: NESE Section: 15 Township: 5S Range: 64W Meridian: 6
 County: ARAPAHOE Field Name: WILDCAT
 Federal, Indian or State Lease Number: 89/6121-S

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 39.614695 PDOP Reading 1.2 Date of Measurement 01/09/2017
 Longitude -104.530996 GPS Instrument Operator's Name Chris Guffey

LOCATION CHANGE (all measurements in Feet)

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

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

FNL/FSL		FEL/FWL	
<u>2280</u>	<u>FSL</u>	<u>440</u>	<u>FEL</u>
<u>2340</u>	<u>FSL</u>	<u>440</u>	<u>FEL</u>

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

Current **Surface** Location **From** QtrQtr NESE Sec 15
 New **Surface** Location **To** QtrQtr NESE Sec 15

Twp 5S Range 64W Meridian 6
 Twp 5S Range 64W Meridian 6

Change of **Top of Productive Zone** Footage **From** Exterior Section Lines:

<u>2310</u>	<u>FSL</u>	<u>600</u>	<u>FEL</u>

Change of **Top of Productive Zone** Footage **To** Exterior Section Lines:

Current **Top of Productive Zone** Location **From** Sec 15
 New **Top of Productive Zone** Location **To** Sec

Twp 5S Range 64W
 Twp Range

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

<u>2310</u>	<u>FSL</u>	<u>100</u>	<u>FWL</u>

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

Current **Bottomhole** Location Sec 16 Twp 5S
 New **Bottomhole** Location Sec Twp

Range 64W ** attach deviated drilling plan
 Range

Is location in High Density Area?

Distance, in feet, to nearest building 5280, public road: 5280, above ground utility: 5280, railroad: 5280,
 property line: 440, lease line: , well in same formation:

Ground Elevation 5937 feet Surface owner consultation date

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 04/23/2018

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 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"/> Other _____	<input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases	

COMMENTS:

SHL change only. TPZ & BHL do not change. Spacing and Formation do not change. Cultural distances are unchanged.

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
Conductor Casing	26				16				65	0	80	40	80	0
Surface String	13	1		2	9	5		8	36	0	2100	872	2100	0
First String	8	1		2	5	1		2	20	0	17835	2681	17835	0

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:

<u>Best Management Practices</u>	
<u>No BMP/COA Type</u>	<u>Description</u>

Operator Comments:

[Empty box for Operator Comments]

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

Signed: _____ Print Name: Justin Garrett
Title: Regulatory Analyst Email: regulatory@ascentgeomatics.com Date: 4/18/2018

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

COGCC Approved: BURN, DIANA Date: 4/26/2018

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>
401612015	SUNDRY NOTICE APPROVED-LOC-DRLG-CSG
401612707	DIRECTIONAL DATA
401612708	DEVIATED DRILLING PLAN
401612710	WELL LOCATION PLAT
401622215	FORM 4 SUBMITTED

Total Attach: 5 Files