

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
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Date Received: 11/06/2018			

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: 10646 Contact Name Kelsi Welch
 Name of Operator: AXIS EXPLORATION LLC Phone: (720) 354-4607
 Address: 370 17TH ST SUITE 5300 Fax: ()
 City: DENVER State: CO Zip: 80202 Email: kwelch@extractionog.com

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 005 07337 00 OGCC Facility ID Number: 454152
 Well/Facility Name: Jamaso 4-65 Well/Facility Number: 5-6-6
 Location QtrQtr: SWNW Section: 4 Township: 4S Range: 65W Meridian: 6
 County: ARAPAHOE Field Name: WILDCAT
 Federal, Indian or State Lease Number: _____

Survey Plat		
Directional Survey		
Srfc 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 39.733280 PDOP Reading 1.6 Date of Measurement 10/12/2018
 Longitude -104.674721 GPS Instrument Operator's Name D. Wimmer

LOCATION CHANGE (all measurements in Feet)

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

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

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

Current Surface Location From	QtrQtr	<u>SWNW</u>	Sec	<u>4</u>	Twp	<u>4S</u>	Range	<u>65W</u>	Meridian	<u>6</u>
New Surface Location To	QtrQtr	<u>SWNW</u>	Sec	<u>4</u>	Twp	<u>4S</u>	Range	<u>65W</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 5

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 6 Twp 4S Range 65W

New **Bottomhole** Location Sec _____ Twp _____ Range _____

Is location in High Density Area? _____

Distance, in feet, to nearest building 1172, public road: 997, above ground utility: 1080, railroad: 4238,
 property line: 150, lease line: _____, well in same formation: _____

Ground Elevation 5590 feet Surface owner consultation date _____

	FNL/FSL		FEL/FWL
	<u>2427</u> <u>FNL</u>		<u>301</u> <u>FWL</u>
	<u>2450</u> <u>FNL</u>		<u>1008</u> <u>FWL</u>
	<u>2440</u> <u>FNL</u>		<u>460</u> <u>FEL</u>
			**
	<u>2440</u> <u>FNL</u>		<u>460</u> <u>FWL</u>
			**

** attach deviated drilling plan

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 10/23/2018

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:

Only the SHL has changed. The Top of Production Zone and BHL are the same.

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	24				16				42	0	80	100	80	0
Surface String	12	1		4	9	5		8	36	0	2500	670	2500	0
First String	8	1		2	5	1		2	20	0	17835	2234	17835	

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:

Extraction requests to relocate the SHL of this well per request of the City of Aurora as they had concerns about the proximity of the drilling rig to their infrastructure.

The SHL qtrqtr, top of production zone and BHL, OWE, and DSU will all remain the same. This SHL relocation does not move the wellhead into a buffer zone. Updated cultural distances have been included.

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: Regulatory Analyst Email: kwelch@extractionog.com Date: 11/6/2018

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

COGCC Approved: Jacobson, Eric Date: 11/30/2018

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>
Permit	Permitting review complete and task passed. - added new elevation based on updated PLAT	11/07/2018
Engineer	rt'd to DRAFT for casing changes due to SHL change (new TD)	11/05/2018
Permit	Permitting review complete and task passed.	11/05/2018

Total: 3 comment(s)

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401803591	SUNDRY NOTICE APPROVED-LOC-DRLG-CSG
401803596	DEVIATED DRILLING PLAN
401803597	DIRECTIONAL DATA
401804777	WELL LOCATION PLAT
401856010	FORM 4 SUBMITTED

Total Attach: 5 Files