

State of Colorado Energy & Carbon Management Commission



DE ET OE ES

Document Number:

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Date Received:

12/03/2025

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

This form is required for reports, updates, and requests as specified in the ECMC rules. It is also used to request changes to some aspects of approved permits for Wells and Oil and Gas Locations.

ECMC Operator Number: 16700 Contact Name Tracey Fallang							
Name of Operator: CHEVRON USA INC				Phone: (303) 596-4818			
Address: 760 HORIZON DRIVE STE 401			Fax: ()				
City: GRAND JL	INCTION State:	CO Zip:	81506	E	mail: tracey.fa	llang@chevro	n.com
FORM 4 SUBMIT	TED FOR:						
Facility Type: OIL	AND GAS DEVELOP	MENT PLAN					
API Number: 05- 00 ID Number: 486609							
Name: OGDP SKF	R 698-10-BV		Number:				
Location QtrQtr:	Section:	Town	ship:	Range:	Meridia	n:	
County:		Field Name:					
Oil & Gas Location	(s) and Oil & Gas Dev	elopment Plan	(OGDP) Inform	ation			
Location(s)							
Location ID	Location Name and	Number					
336056	SKR 698-10-BV Pac	l					
OGDP(s)	1						
OGDP ID	OGDP Name						
486609	OGDP SKR 698-10-	BV					
	N CHANGE OR AS-						
	ation for Well *		PS Location Re	port	As-Built GF	'S Location Re	eport with Survey
	n Change requires a r						
SURFACE LOCATION GPS DATA Data must be provided for Change of Surface Location and As Built Reports.							
Latitude Longitude GPS Quality Value: Type of GPS Quality Value: Measurement Date:							
Well Ground Elevation: feet (Required for change of Surface Location.)							
WELL LOCATION CHANGE							
Well plan is: (Vertical, Directional, Horizontal) FNL/FSL FEL/FWL							
Change of Surface Footage From:							
Change of Surface Footage To:							
Current Surface L		QtrQtr	Sec	Twp		tange	Meridian
New Surface Loca	New Surface Location To QtrQtr Sec Twp Range Meridian						

Change of Top of Productive Zone Footage F	rom:		
Change of Top of Productive Zone Footage T	o :		**
Current Top of Productive Zone Location	Sec	Twp	Range
New Top of Productive Zone Location	Sec	Twp	Range
Change of Base of Productive Zone Footage	From:		
Change of Base of Productive Zone Footage	То:		**
Current Base of Productive Zone Location	Sec	Twp	Range
New Base of Productive Zone Location	Sec	Twp	Range
Change of Bottomhole Footage From :			
Change of Bottomhole Footage To :			**
Current Bottomhole Location Sec	Twp	Range	** attach deviated drilling plan
New Bottomhole Location Sec	Twp	Range	
SAFETY SETBACK Re INFORMATION	quired for change of Surface Loc	cation.	
Distance from Well to nearest:		INSTRUCTIONS:	
Building:	Feet	- Specify all distances	per Rule 308.b.(1). nce greater than 1 mile.
Building Unit:	Feet -	- Building - nearest bu	ilding of any type. If nearest
Public Road:	Feet -	Building is a Building I both.	Jnit, enter same distance for '
Above Ground Utility:	Feet -		fined in 100 Series Rules.
Railroad:	Feet		
Property Line:	Feet		
	uired for change of Top and/or B 1 mile.	ase of Productive Zone	e. Enter 5280 for distance greater
Is this Well within a unit?			
If YES:			
Enter the minimum distance from the Co	mpleted Zone of this Well to the	Unit Boundary:	Feet
Enter the minimum distance from the Co	mpleted Zone of this Well to the	Completed Zone of an	offset Well within the same
unit permitted or completed in the same	formation: Feet		
If NO:			
Enter the minimum distance from the Comp	pleted Zone of this Well to the Lea	ase Line of the describ	ed lease: Feet
Enter the minimum distance from the Comp	oleted Zone of this Well to the Co	mpleted Zone of an off	set Well producing from
the same lease and permitted or complete	d in the same formation:	Feet	
Exception Location			
If this Well requires the approval of a Rule Exception Location Request and Waivers.	401.c Exception Location, enter	the Rule or spacing or	der number and attach the
LOCATION CHANGE COMMENTS			
LOCATION OFFAIRE COMMENTS			

THE	<u>ER</u>				
	RULE 502 VARIA	ANCE			
	Order Number:				
	Description:				
	REMOVE FROM	SURFACE BOND	Signed surface use agr	eement is a require	ed attachment
	CHANGE NAME	OR NUMBER OF WE	LL, FACILITY, OIL & (GAS LOCATION,	OR OGDP
	From: Name	OGDP SKR 698-10-BV	Number		Effective Date:
	To: Name		Number		_
		IT: Permit can only be a vill be conducted to veri	bandoned if the permittify site status.	ed operation has N	OT been conducted.
	WELL:Abandor	n Application for Permit-to	o-Drill (Form2) – Well API	Number	has not been drilled.
		Earthen Pit Permit (Form d pit requires closure per	15) – ECMC Pit Facility II Rule 911)	Number	has not been constructed (Permitted
	CENTRALIZED	E&P WASTE MANAGE	MENT FACILITY: Abando	on Centralized E&P \	Vaste Management Facility Permit
	(Form 28) – Fa	cility ID Number	has not been cons	tructed (Constructed	facility requires closure per Rule 907)
	OIL & GAS LOCAT	TON ID Number:			
	Abandon C future.	Oil & Gas Location Assess	sment (Form 2A) – Locatio	on has not been cons	structed and site will not be used in the
	Keep Oil &	Gas Location Assessmen	nt (Form 2A) active until e	expiration date. This	site will be used in the future.
	Surface disturban	ce from Oil and Gas Op	erations must be reclain	med per Rule 1003	and Rule 1004.
	REQUEST FOR	WELL RECORDS COI	NFIDENTIALITY (Rule	206.c.(1))	
	REQUEST FOR		NFIDENTIALITY (Rule	206.c.(1))	
		LOG UPLOAD	NFIDENTIALITY (Rule	206.c.(1))	
	DIGITAL WELL DOCUMENTS S	LOG UPLOAD UBMITTED Purpose	`		Document Number:
RECL	DIGITAL WELL DOCUMENTS S	LOG UPLOAD UBMITTED Purpose	e of Submission:		Document Number:
	DIGITAL WELL DOCUMENTS SE	LOG UPLOAD UBMITTED Purpose vith CONDITION OF A	e of Submission:		Document Number:
	DIGITAL WELL I DOCUMENTS SI COMPLIANCE W AMATION ITERIM RECLAMA	LOG UPLOAD UBMITTED Purpose vith CONDITION OF A	e of Submission: PPROVAL (COA) on		Document Number:
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Comments:
ENGINEERING AND ENVIRONMENTAL WORK
REPORT OF TEMPORARY ABANDONMENT
Describe the method used to ensure that the Well is closed to the atmosphere and the Operator's plans for future operation of the
Well in the COMMENTS box below as required by Rule 434.b.(1).
REQUEST FOR TEMPORARY ABANDONMENT EXCEEDING 6 MONTHS
State the reason for the extension request and explain the Operator's plans for future operation of the Well in the COMMENTS box below as required by Rule 434.b.(3).
Date well temporarily abandoned
Has Production Equipment been removed from site?
Mechanical Integrity Test (MIT) required. Date of last MIT
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/REQUEST FOR APPROVAL Approximate Start Date
SUBSEQUENT REPORT Date of Activity
■ Bradenhead Plan ■ Venting or Flaring (Rule 903) ■ E&P Waste Mangement
Change Drilling Plan Repair Well Beneficial Reuse of E&P Waste
Gross Interval Change
Underground Injection Control
Request approval of Reuse and Recycling Plan per Rule 905.a.(3). (Reuse and Recycling Plan must be attached.)
Request approval of Alternative Sampling Plan per Rule 909.j.(6). for this Pit. (Alternative Sampling Program must be attached.)
Other
Request that an existing produced water sample from the same formation be used per Rule 909.j.(6) to meet the requirements of Rule 909.j.(1)-(5) for this Well.
Pit ID Pit Name
(No Sample Provided)
Subsequent well operations with heavy equipment (Rule 312)
(No Well Provided)
COMMENTS:
GAS CAPTURE
VENTING AND FLARING:
Operation type: Operational phase requiring venting/flaring:
Reason for venting/flaring:
Describe Other reason for venting/flaring:

Date Run: 12/4/2025 Doc [#404457642]

Describe how the operation will protect and minimize adverse impacts to public health, safety, welfare, the environment, and wildlife resources. If reporting per Rule 903.d.(2), include BMPs used to minimize venting on the BMP Tab: Total volume of gas vented or flared: mcf estimated measured Total duration of emission event: hours consecutive cumulative Submit a single representative gas analysis via Form 43 to create a Sample Site Facility ID# for this Location. Reference the 43 document number on the Related Forms tab. Sample Site Facility ID#:	scribe why venting or flaring is necessary. If reporting per Rule 903.b.(2), 903.c.(3).C, or 903.d.(2), include the explanationale, and cause of the event:	
Total duration of emission event: hours consecutive cumulative Submit a single representative gas analysis via Form 43 to create a Sample Site Facility ID# for this Location. Reference the 43 document number on the Related Forms tab. Sample Site Facility ID#:		d
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OMMENTS:		
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OIL & GAS LOCATION UPDATES

GDP ID 486609	OGDP Name OG	DP SKR 698-10-BV		
TE EQUIPMENT LIST	UPDATES			
dicate the number and	type of major equipment	components planned for	use on this Oil and Ga	s Location:
Wells	Oil Tanks	Condensate Tanks	Water Tanks	Buried Produced Water Vaults
Drilling Pits	Production Pits	Special Purpose Pits	Multi-Well Pits	Modular Large Volume Tank
Pump Jacks	Separators	Injection Pumps	Heater-Treaters	Gas Compressors
Gas or Diesel Motors	Electric Motors	Electric Generators	Fuel Tanks	LACT Unit
Dehydrator Units	Vapor Recovery Unit	VOC Combustor	Flare	Enclosed Combustion Devices
Meter/Sales Building	Pigging Station	Va	por Recovery Towers	_
	EQUIPMENT UPDATES			
	TY SETBACK UPDATES			
THER LOCATION CH	ANGES AND UPDATES			
Provide a description of	f other changes or updates	s to technical information	for this Location:	
OTENTIAL OGDP UPD	DATES			
ROPOSED CHANGES	TO AN APPROVED OGE	OP .		
This Sundry Form	4 is being submitted pursu	ant to Rule 301.c to prop	ose changes to an ap	proved Oil and Gas Development Plar
Check all boxes that	at pertain to the type(s) of	changes being proposed	for this OGDP:	
Add Oil and G	as Location(s)	Add D	rilling and Spacing Ur	it(s)
🔀 Amend Oil and	d Gas Location(s)	Amen	d Drilling and Spacing	Unit(s)
Remove Oil a	nd Gas Location(s)	Remo	ve Drilling and Spacin	g Unit(s)
Oil and Gas L	ocation attachment or plar	n updates Amen	d the lands subject to	the OGDP
Other				
rovide a detailed descri	iption of the changes being	g proposed for this OGDI	P. Attach supporting c	locumentation such as maps if
	submitting this sundry to nce temperatures are stab			to cool production fluids until
	<u>Opera</u>	tor Best Manage	ement Practice	<u></u>
No BMP/COA Ty	pe <u>Descrip</u>	tion		
	<u> </u>			
Operator Commonts				
Operator Comments		(a add as (4) ! ! ! !	h 4	
	Once temperatures are sta			er) to cool production fluids until sundry was submitted 12/3/2025 unde

I hereby certify all	statements made	n this form are, to the best of my knowledge, true,	correct, and complete.
Signed: Print Name: Tracey Fallang			
Title: Regulate	ory Specialist	Date: 12/3/2025	
Based on the information hereby approved.	mation provided h	erein, this Sundry Notice (Form 4) complies with E	CMC Rules and applicable orders and is
ECMC Approved:		Date:	
		CONDITIONS OF APPROVAL, II	ANY LIST
COA Type		<u>Description</u>	
0 COA			
		General Comments	
User Group	Comment		Comment Date
			Stamp Upon Approva
Total: 0 commen	nt(s)		
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