



User Reference Guide

Well Stimulation Disclosure

Table of Contents

COURSE OVERVIEW.....	3
COURSE DESCRIPTION.....	3
1 SUBMIT & REVIEW WELL STIMULATION DISCLOSURE FORM	4
1.1 SUBMIT A WELL STIMULATION DISCLOSURE FORM	4
1.1.1 Key Points.....	20
1.2 REVIEW WELL STIMULATION DISCLOSURE.....	ERROR! BOOKMARK NOT DEFINED.
1.1.2 Key Points.....	Error! Bookmark not defined.

COURSE OVERVIEW

Course Description

This training will describe how well stimulation information is tracked and maintained within the Well Stimulation capability. This includes, but is not limited to, managing alerts to operators, accepting applications and permits for well stimulation, notification of deadlines, recording testing data and the ability to receive documentation related to end of the treatment and post-simulation

1 SUBMIT WELL STIMULATION DISCLOSURE FORM

In this lesson you will learn how to submit and review a 72 Hour Notification Form.

Lesson Objectives:

- Submit a Well Simulation Disclosure

1.1 Submit a Well Stimulation Disclosure Form

The screenshot shows a web application interface with the following elements:

- Home** (top left)
- Help** (top right)
- Navigation tabs: **My Tasks**, **Tasks**, **Alerts**, **Online Forms** (selected), **Forms In Progress**, **Forms Submitted**
- Search bar: **Advanced Filtering** and **disclo**
- Table with columns: **Form Name**, **Form Category**, **Purpose**, **Version**, **Count**
- Table content:

Form Name	Form Category	Purpose	Version	Count
Well Stimulation Disclosure	Well Stimulation	Create or maintain well stimulation disclosure data	1	1
- Footer: **1** items per page, **20** items per page, **Viewing 1 - 1 from 1 results**

Step	Action	Required Fields
1.	From the Home screen, select Online Forms .	
2.	In the search bar on the right, type in “Well Stimulation Disclosure” .	
3.	Click on the blue hyperlink labeled Well Stimulation Disclosure .	

Section 1. Form Information

Well Stimulation Disclosure

Help

Form Navigation

1. Form Information

Form Information
[Hide Form Navigation]

Please enter information below. * Indicates Required Field

Form Name
Well Stimulation Disclosure

Organization *

Aera Energy LLC (A0610) - Bakersfield, CA
▼

WST Permit # *

90313535
▼

Description * ⓘ

Cancel
Save & Continue

Step	Action	Required Fields
1.	You will be taken to Section 1. Form Information page for Well Stimulation Information. Start by typing in the Organization Name and search for the correct organization for the dropdown.	Organization
2.	Select from the available WST Permit # from the dropdown.	WST Permit #
3.	Enter in a Description for this 72-Hour Notification Form. NOTE: It is recommended to enter “Well Name/API, Facility Name or Operator” in Description so that this information can also be used to locate the form. Example: Lake View 2 030-12345	Description
4.	Click Save & Continue .	

Section 2. Operator Information

Please confirm the correct Organization has been selected, and designate contact(s) with their correct role. By default, the Organization's Agent and the form submitter are selected as contacts. * Indicates Required Field

Organization Name
Aera Energy LLC (A0610)

Type of Organization
Corporation

Organization Primary Address
10000 Ming Avenue
Bakersfield, CA 933111301

Organization Primary Phone Number
(661) 665-5325

Ext

Contacts

Name ↑	Phone Number	Email	Role	Actions
Jeffrey Young	(661) 665-5693	jayoung@aeraenergy.comx	Agent	Add Contact Export - Excel Export - PDF
Martina Fisher	(916) 322-2008	martina.fisher@conservation.ca.govx	Submitter	

Step	Action	Required Fields
1.	Review organization details for correctness. <i>Note: changes cannot be made to organization details here.</i>	
2.	Review contacts responsible for form completion and submission.	
3.	If the person is not listed on the contacts list, click “Actions” .	
4.	Click “Add Contact” .	
5.	Complete contact info dialogue box that appears.	
6.	Click blue “Update” button.	
7.	Click “Next” . Next	

Well Stimulation Disclosure

Section 3. Well Information

Well Information ▼

API <input type="text" value="0403026649"/>	Wellbore Code <input type="text" value="00"/>	Type of Stimulation <input type="text" value="Hydraulic Fracturing"/>
Lease <input type="text" value="90240921"/>	Well Number <input type="text" value="7510A-2"/>	Well Status <input type="text" value="Plugged & Abandoned"/>
Well Type <input type="text" value="Oil & Gas"/>	Confidential Well? <input type="text" value="No"/>	Plugback Depth MD (ft) <input type="text"/>
Plugback Depth TVD (ft) <input type="text"/>	Original Total Depth MD (ft) <input type="text"/>	Original Total Depth TVD (ft) <input type="text"/>
Initial Date of Production <input type="text"/>		

Location Information ▼

Offshore/Onshore <input type="text" value="No"/>	Field <input type="text" value="Belridge, South"/>	County <input type="text" value="Kern"/>
Section <input type="text" value="02"/>	Township <input type="text" value="29S"/>	Range <input type="text" value="21E"/>
Base Meridian <input type="text"/>		
Latitude <input type="text" value="35.42916489"/>	Longitude <input type="text" value="-119.68505096"/>	Critical Well? <input type="text" value="No"/>

The well information displayed above is the most recent available information.

A Supplemental Post-Stimulation report is required for this Disclosure.

Step	Action	Required Fields
1.	Verify all well information: API, Wellbore code, Type of Stimulation, Lease Well Number, Well status, Well Type, Confidential status, Plug back depth (MD, TVD) Well TD, and initial Production Date , have been auto populated, or filled in correctly.	All required fields are auto populated
2.	Verify all location onformation: OffShore/Onshore, Field, County, Section, Township, Range, Base Meridian, Latitude, Longtitude, and confidential status has been auto populated, or filled in correctly.	All required fields are auto populated
3.	Select whether this is the most recent information available or if a supplemental form will be submitted after stimulation has been completed.	
4.	Click Next to move to next section. Next	

Section: 4 Treatment Stages

Treatment Stages
[Hide Form Navigation]

Verify and edit Treatment Stage data, if necessary. * Indicates Required Field

Treatment Stages
Advanced Filtering Actions

Stage ...	Top TV...	Botto...	Height ...	Azimuth°	Format...	Actions
1	2030	2211	181	80	1100	Actions

◀ 1 ▶
20 items per page
Viewing 1 - 1 from 1 results

Total Slurry Vol. (bbl)

Step	Action	Required Fields
1.	Click the Actions hyperlink within the table to edit an existing stage. Note: The stages will be pre-populated with the information submitted in the Application for Well Stimulation form.	
2.	Click Actions button and click Create Record to add a new stage, if required.	

Well Stimulation Disclosure

Treatment Stage Information X

* Indicates Required Field

Please enter information below.

Stage No. *

Start Date/Time * End Date/Time *

Perforation Information

Top MD (ft) * Top TVD (ft) * Bottom MD (ft) * Bottom TVD (ft) *

Net Perforations (ft) * Packer Depth MD (ft) Packer Depth TVD (ft)

Fracture Geometry

Length (ft) * Height (ft) * Width (in) * Azimuth **

ADSA Dimensions

1x ADSA Top TVD (ft) * 1x ADSA Bottom TVD (ft) * 2x ADSA Top TVD (ft) * 2x ADSA Bottom TVD (ft) *

5x ADSA Top TVD (ft) * 5x ADSA Bottom TVD (ft) *

Geology

Formation * Formation Top TVD (ft) * Formation Top MD (ft) * Formation Bottom TVD (ft) *

Zone 1 Bottom TVD (ft) Zone 2 Bottom TVD (ft) Zone 3 Bottom TVD (ft)

Field *

Area *

Pool Code *

Maximum Fluid Volumes Proppant

Slurry Volume (bbl) * Clean Fluid Volume (bbl) * Proppant Concentration (ppg) *

Maximum Treatment Rate Pressure

Rate * Surface Pressure (psi) * Bottom Hole Pressure (psi) *

Cancel Save

Step	Action	Required Field
1.	Enter information: Stage Number, Stage Start/End Time/Date, Top (MD TVD), Bottom (MD TVD), Net footage of Perforations, Packer depth (MD TVD), Fracture Geometry (Length, Height, Width, Azimuth), ADSA Dimensions (1x, 2x, 5x Top TVD, Bottom TVD), Geology (Formation, Formation Top (MD TVD) Bottom (MD TVD), Zone 1 2 3 (TVD), Field, Area, Pool code), Slurry Volume, Clean Volume, Proppant Concentration, Rate, Surface Pressure and Bottom hole Pressure.	Stage Number, Stage Start/End Time/Date, Top (MD TVD), Bottom (MD TVD), Fracture Geometry (Length, Height, Width, Azimuth), ADSA Dimensions (1x, 2x, 5x Top TVD, Bottom TVD), Geology (Formation, Formation Top (MD TVD) Bottom (MD TVD), Field, Area, Pool code), Slurry Volume, Clean Volume, Proppant Concentration, Rate, Surface Pressure and Bottom hole Pressure.
2.	Click Save .	
3.	Click Next to move to next section. Next	

Section 5 : Base & Recovered Fluids

Please enter information below. * Indicates Required Field

If hazardous wastes were generated during the well stimulation activities, copies of all hazardous waste manifests used for transportation to an authorized offsite facility will be attached.

Base Fluids ▼

▼ Advanced Filtering
Actions ..

⚙

Water Source Name	Water Source Type	Volume Used (bbl)	Actions
California Aqueduct	Surface Water- Manmade	2900	Actions-

⏪
⏩
1
⏪
⏩
20 ▼ items per page
Viewing 1 - 1 from 1 results 🔄

Step	Action	Required Fields
1.	Click Actions button and click Create Record to add base fluid information	
2.	Click the Actions hyperlink within the table to edit an existing entry.	

Well Stimulation Disclosure

Base Fluid Information X

Please enter information below. * Indicates Required Field

Is a fluid other than water planned to be used?

Water Source Name * **Water Source Location ***

Water Source Type * **Describe Other Water Source ***

Base Fluid Suitability for Other Uses *

Water Source Well ID * **Surface Water Diversion Point ***

Purchased? * **Supplier Name ***

Volume Used (bbl) * **Flashpoint (°C)**

pH

Step	Action	Required Field
1.	Check the box if fluid other than water was used.	
2.	Enter data: Water Source Name, Water Source location, Water Source Type, Describe Other Water Source, Base Fluid Suitability for Other Uses, Water Source Well ID, Surface Water Diversion Point, Purchased, Supplier Name, Volume Used (bbl), Flashpoint (Celsius), and pH.	Water Source Name, Water Source location, Water Source Type, Describe Other Water Source, Base Fluid Suitability for Other Uses, Surface Water Diversion Point, and Volume Used (bbl).
3.	Click Save .	

Well Stimulation Disclosure

Recovered Fluids

Advanced Filtering
Actions

⚙️

Dispo...	Dispo...	UIC P...	Inject...	Inject...	Total...	Rad....	Rad....	Actions
Desalini zation	Water Plant 20	052000 04	Aera Energy LLC	Belridge , South				Actions

⏪
⏩
1
⏪
⏩

items per page

Viewing 1 - 1 from 1 results
🔄

Total Volume Used

2900

Is a second recovered fluid analysis report required?

Step	Action	Required Fields
1.	Click Actions button and click Create Record to add recovered fluids information	
2.	Click the Actions hyperlink within the table to edit an existing entry.	

Recovered Fluid Information ✕

Please enter information below. * Indicates Required Field

Fluid Information

Disposal Information

Disposal Method * **Disposal Location ***

Desalinization Water Plant 20

Describe Other Disposal Method * **UIC Project ID ***

05200004

Injection Operator **Injection Field**

Aera Energy LLC Belridge, South

Vol. Recovered at First Sampling (bbl) **Total Vol. Recovered (bbl) ***

Radiological Information

Rad. of Recovered Fluid (pCi/L) * **Radiological Constituent**

Rad. Analytical Method **Rad. Analysis Equipment**

Step	Action	Required Field
1.	Enter data: Fluid Disposal Method, Location, Description of other disposal method, UIC Project ID, Volume Recovered at First Sampling (bbl), Total Volume Recovered (bbl), Rad of Recovered Fluid, Radiological Constituent, Rad Analytical Method, and Rad Analysis Equipment.	Fluid Disposal Method, Location, Description of other disposal method, UIC Project ID, Volume Recovered at First Sampling (bbl), Total Volume Recovered (bbl), Rad of Recovered Fluid, Radiological Constituent
2.	Click Save .	
3.	Click Next to move to next section. <input type="button" value="Next"/>	

Section: 6 Constituents & Additives

Chemical Constituents					
		Advanced Filtering	Actions	Search	
Stage No.	Chemical N...	CAS #	Unique ID (i...	Concentrati...	Actions
1	Guar gum	9000-30-0		0.18	Actions

Navigation: 1 | 20 items per page | Viewing 1 - 1 from 1 results

Step	Action	Required Fields
1.	Click Actions button and click Create Record to add Chemical Constituent information .	
2.	Click the Actions hyperlink within the table to edit an existing entry.	

Chemical Constituent Information ✕

Please enter information below. * Indicates Required Field

Stage No. *

Chemical Name *

CAS # **Unique ID (if no CAS #)**
 ▼

Concentration % Mass *

Step	Action	Required Field
1.	Enter data: Stage Number, Chemical name, CAS #, Unique ID and Concentration % Mass . Note: If no CAS # exists use most identifiable name or number.	Stage Number, Chemical name, CAS # and Concentration % Mass.
2.	Click Save .	

Well Stimulation Disclosure

Additives ▼

▼ Advanced Filtering
Actions ▼

Search

⚙️

Stage No.	Trade Name	Concentration %	Is Rad. Compo...	Actions
No results to display				

⏪
⏩

0

▶
⏭

20 ▼

items per page

No results to display
🔄

Step	Action	Required Fields
1.	Click Actions button and click Create Record to add base fluid information	
2.	Click the Actions hyperlink within the table to edit an existing entry.	

Additive Information
✕

Please enter information below. * Indicates Required Field

Additive Information

Trade Secret Production *

Trade Name

Intended Purpose

Stage No. *

Supplier

Concentration % *

Radiological Information

Is Rad. Component or Tracer? *

Rad. Recovery Rate

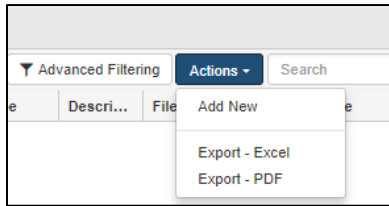
Rad. Material Disposal Location

Rad. Recovery Method


Rad. Material Disposal Method

Step	Action	Required Field
1.	Enter Data: Trade Secret Production, Stage Number, Trade Name, Supplier, Intended Purpose, Concentration %, Is Rad Component or Tracer, Rad Recovery Method, Rad Recovery Rate, Rad Material Disposal Method and Rad Material Disposal Location.	Trade Secret Production, Stage Number, Concentration, Is Rad Component or tracer
2.	Click Save .	
3.	Click Next to move to next section. Next	

Section 7 Document Upload



A screenshot of a 'Document Upload' popup window. At the top right, it says '* Indicates Required Field'. There are two radio buttons: 'Upload New Document' (selected) and 'Associate Existing WellSTAR Documents'. Below these are two checkboxes: 'Internal Only' and 'Request Confidentiality'. The form includes several required fields: 'Type' (a dropdown menu), 'Relevant Date' (a date picker), 'Description' (a text input field with a note below it: 'All comments are discoverable records, open to public review.'), and 'Filename' (a text input field with a 'Browse' button). At the bottom right, there are 'Cancel' and 'Upload' buttons.

Step	Action	Required Fields
1.	Upload any pertaining documents applicable to the Application for Well Stimulation Permit form.	
2.	To upload, click Actions then Add New . A popup will expand below.	
3.	In this popup, input all information. To add the document, select Browse , search for the correct file and click Upload . Or select Associate Existing WellSTAR Document and select the document ID.	Type, Relevant Date, Description, Document ID
4.	Select “Next” . 	

Section 8. Form Submit

Acknowledgement

Submitter

Internal User John Wilson

Date Received

2/14/2019 📅

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


Form Submit Preview

Click the button below to preview your submission summary.

Preview Submission Summary

Step	Action	Required Fields
1.	If any form needs to be added, click Add Form under Online Form Association. This creates a popup. Type in the form ID or name and click “Save” .	
2.	If any comments pertaining to the submittal is needed, type in the comment and click Add under Comments.	
3.	When ready to acknowledge, click the box label “I hereby certify...” . This autopopulates the user’s name who is filling out the form.	
4.	Click the button “Preview Submission Summary” to generate the submission.	
5.	When satisfied with the submission, click “Submit” . Submit	

Section 9. Confirmation

Confirmation		[Hide Form Navigation]
	Your form has been submitted successfully. You will be notified when a determination has been made.	

Step	Action	Required Fields
1.	No action needed. .	

1.1.1 Key Points

- Both internal and external users can submit this form.
- All Comments in the submittal and review progress are cataloged and publically available.