

FORM
2A

Rev
04/01

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:

400120424

Oil and Gas Location Assessment

☐ New Location ☒ Amend Existing Location Location#: 318744

Submit original plus one copy. This form is to be submitted to the COGCC prior to any ground disturbance activity associated with oil and gas development operations. This Assessment may be approved as a stand alone application or submitted as an informational report accompanying an Application for Permit-To-Drill, Form 2. Approval of this Assessment will allow for the construction of the below specified location; however, it does not supersede any land use rules applied by the local land use authority. This form may serve as notice to land owners and other interested parties, please see the COGCC web site at <http://colorado.gov/cogcc/> for all accompanying information pertinent to this Oil and Gas Location Assessment.

Location ID:

318744

Expiration Date:

☒ This location assessment is included as part of a permit application.

1. CONSULTATION

- ☐ This location is included in a Comprehensive Drilling Plan. CDP # _____
- ☐ This location is in a sensitive wildlife habitat area.
- ☐ This location is in a wildlife restricted surface occupancy area.
- ☐ This location includes a Rule 306.d.(1)A.ii. variance request.

2. Operator

Operator Number: 47120
Name: KERR-MCGEE OIL & GAS ONSHORE LP
Address: P O BOX 173779
City: DENVER State: CO Zip: 80217-3779

3. Contact Information

Name: CHERYL LIGHT
Phone: (720) 929-6461
Fax: (720) 929-7461
email: CHERYL.LIGHT@ANADARKO.COM

4. Location
Identification:

Name: THOMASON Number: 4-15
County: WELD
QuarterQuarter: NWNW Section: 15 Township: 2N Range: 65W Meridian: 6 Ground Elevation: 4864

Define a single point as a location reference for the facility location. This point should be used as the point of measurement in the drawings to be submitted with this application. When the location is to be used as a well site then the point shall be a well location.

Footage at surface: 979 feet FNL, from North or South section line, and 1041 feet FWL, from East or West section line.

Latitude: 40.143288 Longitude: -104.655916 PDOP Reading: 2.1 Date of Measurement: 08/17/2010

Instrument Operator's Name: BEN MILIUS

5. Facilities (Indicate the number of each type of oil and gas facility planned on location):

Special Purpose Pits: Drilling Pits: Wells: Production Pits: Dehydrator Units:
Condensate Tanks: Water Tanks: Separators: Electric Motors: Multi-Well Pits:
Gas or Diesel Motors: Cavity Pumps: LACT Unit: Pump Jacks: Pigging Station:
Electric Generators: Gas Pipeline: Oil Pipeline: Water Pipeline: Flare:
Gas Compressors: VOC Combustor: Oil Tanks: Fuel Tanks:

Other: EXISTING HSR-NICHOLS 6-15A, THOMASON 3-15, UPRR 62 PAN AM GAS UNIT K #2 PLUS 5 NEW WELLS WILL BE FLOWING INTO THIS FACILITY

6. Construction:

Date planned to commence construction: 06/10/2011 Size of disturbed area during construction in acres: 2.88
Estimated date that interim reclamation will begin: 08/01/2011 Size of location after interim reclamation in acres: 0.20
Estimated post-construction ground elevation: 4864 Will a closed loop system be used for drilling fluids: Yes ☒
Will salt sections be encountered during drilling: Yes ☐ No ☒ Is H2S anticipated? Yes ☐ No ☒
Will salt (>15,000 ppm TDS Cl) or oil based muds be used: Yes ☐ No ☒
Mud disposal: Offsite ☒ Onsite ☐ Method: Land Farming ☐ Land Spreading ☒ Disposal Facility ☐
Other: _____

7. Surface Owner:

Name: LEONARD & SHEILA THOMASON Phone: 303-536-4148
Address: 21442 CR 22 Fax: _____
Address: _____ Email: _____
City: HUDSON State: CO Zip: 80642-9517 Date of Rule 306 surface owner consultation: 08/10/2010
Surface Owner: ☒ Fee ☐ State ☐ Federal ☐ Indian
Mineral Owner: ☒ Fee ☐ State ☐ Federal ☐ Indian
The surface owner is: ☐ the mineral owner ☐ committed to an oil and gas lease
☐ is the executer of the oil and gas lease ☐ the applicant
The right to construct the location is granted by: ☐ oil and gas lease ☒ Surface Use Agreement ☐ Right of Way
☐ applicant is owner
Surface damage assurance if no agreement is in place: ☐ \$2000 ☐ \$5000 ☐ Blanket Surety ID _____

8. Reclamation Financial Assurance:

☒ Well Surety ID: 20010124 ☐ Gas Facility Surety ID: _____ ☐ Waste Mgnt. Surety ID: _____

9. Cultural:

Is the location in a high density area (Rule 603.b.): Yes ☐ No ☒
Distance, in feet, to nearest building: 1371, public road: 979, above ground utilit: 1018
, railroad: 23034, property line: 979

10. Current Land Use (Check all that apply):

Crop Land: ☐ Irrigated ☐ Dry land ☐ Improved Pasture ☐ Hay Meadow ☐ CRP
Non-Crop Land: ☒ Rangeland ☐ Timber ☐ Recreational ☐ Other (describe): _____
Subdivided: ☐ Industrial ☐ Commercial ☐ Residential

11. Future Land Use (Check all that apply):

Crop Land: ☐ Irrigated ☐ Dry land ☐ Improved Pasture ☐ Hay Meadow ☐ CRP
Non-Crop Land: ☒ Rangeland ☐ Timber ☐ Recreational ☐ Other (describe): _____
Subdivided: ☐ Industrial ☐ Commercial ☐ Residential

12. Soils:

List all soil map units that occur within the proposed location. Attach the National Resource Conservation Service (NRCS) report showing the "Map Unit Description" report listing the soil typical vertical profile. This data is to be used when segregating topsoil.

The required information can be obtained from the NRCS web site at <http://soildatamart.nrcs.usda.gov/> or from the COGCC web site GIS Online map page found at <http://colorado.gov/cogcc>. Instructions are provided within the COGCC web site help section.

NRCS Map Unit Name: 43 NUNN LOAMY SAND, 0 TO 3 PERCENT SLOPES

NRCS Map Unit Name: 69 VALENT SAND, 0 TO 3 PERCENT SLOPES

NRCS Map Unit Name: _____

13. Plant Community:

Complete this section only if any portion of the disturbed area of the location's current land use is on non-crop land.

Are noxious weeds present: Yes ☐ No ☒

Plant species from: ☐ NRCS or, ☒ field observation Date of observation: 01/25/2011

List individual species: Aster – unidentified annual/ false buffalo grass – Monroa squarrosa/Fescue – Festuca sp.

Check all plant communities that exist in the disturbed area.

- ☐ Disturbed Grassland (Cactus, Yucca, Cheatgrass, Rye)
☐ Native Grassland (Bluestern, Grama, Wheatgrass, Buffalograss, Fescue, Oatgrass, Brome)
☐ Shrub Land (Mahogany, Oak, Sage, Serviceberry, Chokecherry)
☐ Plains Riparian (Cottonwood, Willow, Aspen, Maple, Poplar, Russian Olive, Tamarisk)
☐ Mountain Riparian (Cottonwood, Willow, Blue Spruce)
☐ Forest Land (Spruce, Fir, Ponderosa Pine, Lodgepole Pine, Juniper, Pinyon, Aspen)
☐ Wetlands Aquatic (Bullrush, Sedge, Cattail, Arrowhead)
☐ Alpine (above timberline)
☒ Other (describe): Forb-dominated Rangeland and Disturbed/Developed

14. Water Resources:

Rule 901.e. may require a sensitive area determination be performed. If this determination is performed the data is to be submitted with the Form 2A.

Is this a sensitive area: ☐ No ☒ Yes Was a Rule 901.e. Sensitive Areas Determination performed: ☒ No ☐ Yes

Distance (in feet) to nearest surface water: 1626, water well: 1021, depth to ground water: 9

Is the location in a riparian area: ☒ No ☐ Yes Was an Army Corps of Engineers Section 404 permit filed ☒ No ☐ Yes

Is the location within a Rule 317B Surface Water Supply Area buffer zone:

☒ No ☐ 0-300 ft. zone ☐ 301-500 ft. zone ☐ 501-2640 ft. zone

If the location is within a Rule 317B Surface Water Supply Area buffer have all public water supply systems within 15 miles been notified: ☒ No ☐ Yes

15. Comments:

WATER WELL PERMIT #: 46498/The reference picture for Rangeland is on forb-dominated rangeland at the center of the location as shown in the looking north photograph.

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

Signed: _____ Date: _____ Email: DJREGULATORY@ANADARKO.COM

Print Name: CHERYL LIGHT Title: SENIOR REGULATORY ANALYST

Based on the information provided herein, this Application for Permit-to-Drill complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ Director of COGCC _____ Date: _____

CONDITIONS OF APPROVAL, IF ANY:

All representations, stipulations and conditions of approval stated in this Form 2A for this location shall constitute representations, stipulations and conditions of approval for any and all subsequent operations on the location unless this Form 2A is modified by Sundry Notice, Form 4 or an Amended Form 2A.

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Attachment Check List

Att Doc Num	Name
400120435	WELL LOCATION PLAT
400120436	TOPO MAP
400120437	LOCATION PICTURES
400120438	LOCATION DRAWING
400120440	HYDROLOGY MAP
400120441	ACCESS ROAD MAP
400120442	NRCS MAP UNIT DESC
400120443	MULTI-WELL PLAN
400120444	SURFACE AGRMT/SURETY
400120445	30 DAY NOTICE LETTER
400128652	REFERENCE AREA PICTURES

Total Attach: 11 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)

BMP

<u>Type</u>	<u>Comment</u>

Total: 0 comment(s)