

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



Table with columns DE, ET, OE, ES

Document Number: 400224714

Oil and Gas Location Assessment

[X] New Location [] Amend Existing Location Location#: _____

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...

Location ID: 427094 Expiration Date: 12/26/2014

[X] 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: GOBBLER Number: 16N-27HZ
County: WELD
Quarter: NENE Section: 22 Township: 2N Range: 66W Meridian: 6 Ground Elevation: 5077

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...

Footage at surface: 300 feet FNL, from North or South section line, and 660 feet FEL, from East or West section line.
Latitude: 40.130084 Longitude: -104.756255 PDOP Reading: 2.3 Date of Measurement: 09/28/2011
Instrument Operator's Name: OWEN McKEE

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

Special Purpose Pits: [] Drilling Pits: [2] Wells: [1] Production Pits: [] Dehydrator Units: []
Condensate Tanks: [] Water Tanks: [] Separators: [] Electric Motors: [] Multi-Well Pits: []
Gas or Diesel Motors: [] Cavity Pumps: [] LACT Unit: [] Pump Jacks: [2] Pigging Station: []
Electric Generators: [] Gas Pipeline: [] Oil Pipeline: [] Water Pipeline: [] Flare: []
Gas Compressors: [] VOC Combustor: [] Oil Tanks: [] Fuel Tanks: []
Other: _____

6. Construction:

Date planned to commence construction: 01/01/2012 Size of disturbed area during construction in acres: 10.00
Estimated date that interim reclamation will begin: 03/31/2012 Size of location after interim reclamation in acres: 0.50
Estimated post-construction ground elevation: 5077 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: _____ Phone: _____
Address: _____ Fax: _____
Address: _____ Email: _____
City: _____ State: _____ Zip: _____ Date of Rule 306 surface owner consultation: 09/28/2011
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: 1924, public road: 300, above ground utilit: 3376
, railroad: 14677, property line: 300

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: 70 Valent sand, 3 to 9 percent slopes

NRCS Map Unit Name: 72 Vona loamy sand, 0 to 3 percent slopes

NRCS Map Unit Name: 73 Vona loamy sand, 3 to 5 percent slopes

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: 10/31/2011

List individual species: Cheatgrass - Anisantha tectorum NOXIOUS WEED

Check all plant communities that exist in the disturbed area.

- Disturbed Grassland (Cactus, Yucca, Cheatgrass, Rye)
- Native Grassland (Bluestem, 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): Cheatgrass - Grass Rangeland

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: 6864, water well: 1830, depth to ground water: 490

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 Suppl 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:

Closest Water well permit #: 193332. A request letter and waiver (s) are attached to the Form 2's and Form 2A to request an exception location and twinning waiver. The wells are being placed at the locations described on the plats at the request of the surface owner.

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

Signed: _____ Date: 11/21/2011 Email: DJRegulator@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: David S. Nashin Director of COGCC Date: 12/27/2011

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.

Attachment Check List

Att Doc Num	Name
400224714	FORM 2A SUBMITTED
400224734	MULTI-WELL PLAN
400224735	30 DAY NOTICE LETTER
400224736	HYDROLOGY MAP
400224737	LOCATION DRAWING
400224738	LOCATION PICTURES
400224739	NRCS MAP UNIT DESC
400224740	WELL LOCATION PLAT
400224741	TOPO MAP
400224743	ACCESS ROAD MAP
400224744	SURFACE AGRMT/SURETY
400224745	WASTE MANAGEMENT PLAN
400224765	PROPOSED BMPs
400225671	REFERENCE AREA PICTURES
400225675	EXCEPTION LOC REQUEST
400225676	EXCEPTION LOC WAIVERS

Total Attach: 16 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Final review complete	12/23/2011 11:57:33 AM
Permit	Comment added as per opr.	12/21/2011 10:28:21 AM
Permit	Back on hold for comment on the for 2 permit requesting exception or wiavers.	12/20/2011 2:04:34 PM
Permit	Final Review Complete.	12/19/2011 2:32:52 PM
OGLA	OK to pass.	11/29/2011 4:34:43 PM
Permit	Ready to pass pending public comment 12/12/11.	11/22/2011 9:53:30 AM

Total: 6 comment(s)

BMP

<u>Type</u>	<u>Comment</u>
Drilling/Completion Operations	<ol style="list-style-type: none"><li data-bbox="467 170 1520 352">1. At least seven (7) days prior to fracture stimulation, the operator is to notify all operators of non-operated wells within 300 feet of the wellbore to be fracture stimulated of the anticipated date stimulation date and the recommended best management practice to shut-in all wells within 300' of the stimulated wellbore completed in the same formation.<li data-bbox="467 352 1520 436">2. The operator will monitor the bradenhead pressure of all wells operated by the operator within 300 feet of the well to be fracture stimulated.<li data-bbox="467 436 1520 667">3. Bradenhead pressure gauges are to be installed 24 hours prior to stimulation. The gauges are to read at least once during every 24-hour period until 24-hours after stimulation is completed (post flowback). The gauges are to be of the type able to read current pressure and record the maximum encountered pressure in a 24-hour period. The gauge is to be reset between each 24-hour period. The pressures are to be recorded and saved. Alternate electronic measurement may be used to record the prescribed pressures.<li data-bbox="467 667 1520 863">4. If at any time during stimulation or the 24-hour post-stimulation period, the bradenhead annulus pressure of the treatment well or offset wells increases more than 200 psig, as per Rule 341, the operator of the well being stimulated shall verbally notify the Director as soon as practicable, but no later than twenty-four (24) hours following the incident. Within fifteen (15) days after the occurrence, the operator shall submit a Sundry Notice, Form 4, giving all details, including corrective actions taken.

Total: 1 comment(s)