

State of Colorado
Oil and Gas Conservation Commission

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



DE	ET	OE	ES
Document Number: 400430509			

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: 47120 Contact Name Cheryl Light
 Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6461
 Address: P O BOX 173779 Fax: (720) 929-7461
 City: DENVER State: CO Zip: 80217-3779 Email: cheryl.light@anadarko.com

Complete the Attachment
Checklist

OP OGCC

API Number : 05- 123 36744 00 OGCC Facility ID Number: 431701
 Well/Facility Name: GOBBLER Well/Facility Number: 37C-27HZ
 Location QtrQtr: SWSE Section: 22 Township: 2N Range: 66W Meridian: 6
 County: WELD Field Name: WATTENBERG
 Federal, Indian or State Lease Number: _____

Survey Plat		
Directional Survey		
Srvc 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 40.118686 PDOP Reading 2.0 Date of Measurement 04/15/2013
 Longitude -104.761805 GPS Instrument Operator's Name OWEN MCKEE

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 SWSE Sec 22 Twp 2N Range 66W Meridian 6

New **Surface** Location **To** QtrQtr SWSE Sec 22 Twp 2N Range 66W Meridian 6

Change of **Top of Productive Zone** Footage **From** Exterior Section Lines: 615 FSL 1177 FEL

Change of **Top of Productive Zone** Footage **To** Exterior Section Lines: 50 FSL 1177 FEL **

Current **Top of Productive Zone** Location **From** Sec 22 Twp 2N Range 66W

New **Top of Productive Zone** Location **To** Sec 22 Twp 2N Range 66W

Change of **Bottomhole** Footage **From** Exterior Section Lines: 460 FSL 1177 FEL

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

Current **Bottomhole** Location Sec 27 Twp 2N Range 66W ** attach deviated drilling plan

New **Bottomhole** Location Sec Twp Range

Is location in High Density Area? No

Distance, in feet, to nearest building 530, public road: 818, above ground utility: 426, railroad: 13073,

property line: 447, lease line: 0, well in same formation: 255

Ground Elevation 5054 feet Surface owner consultation date 04/15/2013

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 07/17/2013

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:

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
Surface String	13	1		2	9	5		8	36	0	1050	400	1050	0
First String	8	3		4	7	0		0	26	0	7968	800	7968	0
1ST LINER	6	1		8	4	1		2	11.6	6964	12835			

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:

BMP

Type

Comment

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

Total: 0 comment(s)

Operator Comments:

UNIT CONFIGURATION DID NOT CHANGE: CODL: Sec. 22:S/2SE/4; Sec. 27:E/2.

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

Signed: _____ Print Name: Cheryl Light
Title: Sr. Regulatory Analyst Email: DJRegulatory@anadarko.com Date: _____

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

COGCC Approved: _____ Date: _____

CONDITIONS OF APPROVAL, IF ANY:

General Comments

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

Total: 0 comment(s)

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400430518	EXCEPTION LOC REQUEST
400430520	EXCEPTION LOC WAIVERS
400430521	WELL LOCATION PLAT
400430522	DEVIATED DRILLING PLAN
400430523	PROPOSED SPACING UNIT
400430524	DIRECTIONAL DATA

Total Attach: 6 Files