

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
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Date Received: <u>11/30/2013</u>			

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	33790	00	OGCC Facility ID Number:	423915			
Well/Facility Name:	STREAR		Well/Facility Number:		36-10				
Location QtrQtr:	SESE	Section:	10	Township:	2N	Range:	67W	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 _____ PDOP Reading _____ Date of Measurement _____
Longitude _____ GPS Instrument Operator's Name _____

LOCATION CHANGE (all measurements in Feet)

Well will be: _____ (Vertical, Directional, Horizontal)

Change of **Surface** Footage **From** Exterior Section Lines:

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

Current **Surface** Location **From** QtrQtr SESE Sec 10

New **Surface** Location **To** QtrQtr _____ Sec _____

Change of **Top of Productive Zone** Footage **From** Exterior Section Lines:

Change of **Top of Productive Zone** Footage **To** Exterior Section Lines:

Current **Top of Productive Zone** Location **From** Sec 10

New **Top of Productive Zone** Location **To** Sec _____

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

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

Current **Bottomhole** Location Sec 10 Twp 2N

New **Bottomhole** Location Sec _____ Twp _____

Is location in High Density Area? _____

Distance, in feet, to nearest building _____, public road: _____, above ground utility: _____, railroad: _____,

property line: _____, lease line: _____, well in same formation: _____

Ground Elevation _____ feet Surface owner consultation date _____

FNL/FSL		FEL/FWL	
573	FSL	668	FEL
Twp <u>2N</u>	Range <u>67W</u>	Meridian <u>6</u>	
Twp _____	Range _____	Meridian _____	
36	FSL	2561	FWL
Twp <u>2N</u>	Range <u>67W</u>		
Twp _____	Range _____		
10	FSL	2559	FWL
			**

** attach deviated drilling plan

CHANGE OR ADD OBJECTIVE FORMATION AND/OR SPACING UNIT

<u>Objective Formation</u>	<u>Formation Code</u>	<u>Spacing Order Number</u>	<u>Unit Acreage</u>	<u>Unit Configuration</u>

OTHER CHANGES

☐ **REMOVE FROM SURFACE BOND** Signed surface use agreement is a required attachment

☐ **CHANGE OF WELL, FACILITY OR OIL & GAS LOCATION NAME OR NUMBER**

From: Name STREAR Number 36-10 Effective Date: _____

To: Name _____ Number _____

☐ **ABANDON PERMIT: Permit can only be abandoned if the permitted operation has NOT been conducted. Field inspection will be conducted to verify site status.**

☐ WELL: Abandon Application for Permit-to-Drill (Form2) – Well API Number _____ has not been drilled.

☐ PIT: Abandon Earthen Pit Permit (Form 15) – COGCC Pit Facility ID Number _____ has not been constructed (Permitted and constructed pit requires closure per Rule 905)

☐ **CENTRALIZED E&P WASTE MANAGEMENT FACILITY:** Abandon Centralized E&P Waste Management Facility Permit (Form 28) – Facility ID Number _____ has not been constructed (Constructed facility requires closure per Rule 908)

OIL & GAS LOCATION ID Number: _____

☐ Abandon Oil & Gas Location Assessment (Form 2A) – Location has not been constructed and site will not be used in the future.

☐ Keep Oil & Gas Location Assessment (Form 2A) active until expiration date. This site will be used in the future.

Surface disturbance from Oil and Gas Operations must be reclaimed per Rule 1003 and Rule 1004.

☐ **REQUEST FOR CONFIDENTIAL STATUS**

☐ **DIGITAL WELL LOG UPLOAD**

☐ **DOCUMENTS SUBMITTED** Purpose of Submission: _____

RECLAMATION**INTERIM RECLAMATION**

☐ Interim Reclamation will commence approximately _____

Per Rule 1003.e.(3) operator shall submit Sundry Notice reporting interim reclamation is complete and site is ready for inspection when vegetation reaches 80% coverage.

☐ Interim reclamation complete, site ready for inspection.

Per Rule 1003.e(3) describe interim reclamation procedure in Comments below or provide as an attachment and attach required location photographs.

Field inspection will be conducted to document Rule 1003.e. compliance

FINAL RECLAMATION

☐ Final Reclamation will commence approximately _____

Per Rule 1004.c.(4) operator shall submit Sundry Notice reporting final reclamation is complete and site is ready for inspection when vegetation reaches 80% coverage.

☐ Final reclamation complete, site ready for inspection. Per Rule 1004.c(4) describe final reclamation procedure in Comments below or provide as an attachment.

Field inspection will be conducted to document Rule 1004.c. compliance

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 12/18/2013

☐ 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 type="checkbox"/> Change Drilling Plan | <input checked="" 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:

BRADENHEAD

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

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:

Best Management Practices

<u>No</u>		<u>BMP/COA Type</u>	<u>Description</u>

Operator Comments:

Strear 36-10 Bradenhead
Well needs Bradenhead work completed
Well is to be worked on in preparation for APC BUTTERBALL 13-10HZ PAD scheduled to begin frac 12/30/13
Well does NOT need gyro survey
Nio top: 7662'; TOC: 1050'
No known casing issues
1 Level location for base beam rig.
2 Call Foreman or Field Coordinator before rig up to catch plunger, isolate production equipment, and ask if replacement parts/equipment are requested. Operations need to hook up the Bradenhead pressure and bleed off the pressure before the rig gets on location.
3 Check and report surface casing pressure. If surface casing is not accessible at ground level, replumb so valve is at ground level.
4 Spot a minimum of 11 jts 2-3/8", 4.7#, J-55 EUE TBG for replacement and 35 jts 1-1/4", 2.33#/ft, J-55 10rd IJ for annular cement job.
5 MIRU slickline. Fish production equipment as necessary and tag fill. Note tagged depth in OpenWells. RDMO slickline.
6 MIRU WO rig. Kill well, as necessary, with biocide treated fresh water. ND WH. NU BOP.
7 Unseat landing joint and lay down.
8 MIRU EMI services. TOO H with 2-3/8" TBG while SB. EMI on TOO H. LD joints with wall loss or penetrations > 35%. Replace joints as necessary. **Keep yellow & blue band tubing. Note joint number and depth of tubing leak(s) on PRODUCTION EQUIPMENT FAILURE REPORT IN OPEN WELLS.
9 TIH with 2-3/8" TBG & RBP suitable for 4-1/2", 11.6#, I-80 casing. Set RBP at 4490'. (Collars at 4470' & 4510').
10 Circulate gas out of well and pressure test RBP & CSG to 2000 psi for 15 min. Dump 2 sx sand on top of RBP & TOO H while standing back TBG.
11 ND BOP. ND WH. Unland 4-1/2" casing. NU double entry flange.
12 PU 1-1/4", 2.33#/ft J-55 10rd IJ tubing and TIH outside 4-1/2" casing and open hole to 1000'. Circulate with biocide treated fresh water on TIH.
13 MIRU cement services. Mix and pump cement job as follows: Freshwater spacer, 20 bbls Sodium Metasilicate, 150 sx 15.8 ppg neat Class G cement with 1/4#/sx cello-flake. The cement is to be retarded for 125 degF for a six hour pump time. (Attempt to cement from 1000' to 500').
14 Trip out of the hole with 1-1/4" tubing and shut in overnight.
15 Rig down cementing services.
16 Reland 4-1/2" CSG. ND double entry flange. Install new WHI 5000 psi flanged tubing head complete with 5000 psi rated casing valves. Install 7-1/16", 5000 psi tubing head adapter with new 5000 psi master valve with 2-3/8" 8 round threaded connection. SDFN to WOC.
17 MIRU wireline services.
18 PU and RIH with CCL-GR-CBL-VDL. Run from 1100' to surface, or 200' above the top of cement. RDMO wireline. If the cement is not above 500' then contact engineer.
19 PU and TIH with 2-3/8" TBG & retrieving head. Circulate sand off RBP, latch RBP and TOO H standing back TBG & laying down retrieving head and RBP.
20 If clean out is not necessary, skip to the next step. PU and TIH with TBG and clean out to at least 8100'. Bail if/when needed to assist with cleanout. (Bottom CD perf 7945') TOO H and SB 2-3/8" TBG.
21 PU and TIH with NC, XN profile nipple, and 2-3/8" TBG and land well at 7867', which is 1 jt above CD perfs.
22 RU rig lubricator. Broach tubing to XN nipple. RD rig lubricator.
23 ND BOPE. NU WH. Ensure all valves on WH are rated to minimum 5000 psi and ensure new TBG head has new R-46 ring gasket installed.
24 MIRU hydrotester. Pressure test new TBG head to 5000 psi for 15 minutes. After successful pressure test, proceed.
25 RDMO WO Rig. Clean location and swab if necessary. Notify Foreman or Field Coordinator of completed workover operations and turn well over to production team.
completed workover operations and turn well over to production team.

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: 11/30/2013

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

COGCC Approved: SCHLAGENHAUF, MARK Date: 12/3/2013

CONDITIONS OF APPROVAL, IF ANY:

COA Type

Description

	The additional cement referenced shall be placed as indicated and comply with Rule 317.i. The placed cement shall be verified with a CBL and documented with a Form 5.
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General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)

Attachment Check List

Att Doc Num

Name

400520301	FORM 4 SUBMITTED
400520302	OTHER

Total Attach: 2 Files