

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203

Phone: (303) 894-2100 Fax: (303) 894-2109



DE	ET	OE	ES
Document Number: <div>400579320</div>			
Date Received: <div>03/31/2014</div>			

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 Paul Schneider	Complete the Attachment Checklist
Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP	Phone: (720) 929-6726	
Address: P O BOX 173779	Fax: ()	
City: DENVER State: CO Zip: 80217-3779	Email: Paul.schneider@anadarko.com	
API Number : 05- 123 39164 00 OGCC Facility ID Number: 436504 Well/Facility Name: SEKICH STATE Well/Facility Number: 39C-17HZ Location QtrQtr: SWSW Section: 18 Township: 3N Range: 67W Meridian: 6 County: WELD Field Name: WATTENBERG Federal, Indian or State Lease Number:		Survey Plat Directional Survey Srfc Eqpmt Diagram Technical Info Page Other

GROUND WATER SAMPLING

Uses of Ground Water Sampling Section

Request an Exception to Ground Water Sampling Requirements in Greater Wattenberg Area Rule 318A.e(4) or in Statewide Rule 609.c. Request a Previously Sampled Water Source in the COGIS database be used to meet sampling requirements as described in Rule 609.d. (3).
NOTE: If this Sundry Notice is being submitted to request a Ground Water Sampling Exception it cannot be used for any other purpose except requesting the use of a Previously Sampled Water Source in the COGIS database.

- ☒ Request an Exception to Ground Water Sampling Requirements per Greater Wattenberg Area Rule 318A.e(4):There are no Available Water Sources located within the governmental quarter section or within a previously unsampled governmental quarter section within a ½-mile radius of this proposed Oil and Gas Well, Multi-Well Site, or Dedicated Injection Well.
- ☐ Request an Exception to Ground Water Sampling Requirements per Statewide Rule 609.c.

Number of Water Sources located within one-half (1/2) mile of a proposed Oil and Gas Well, Multi-Well Site, or Dedicated Injection Well.

Number of Water Source Exceptions requested per Rule 609.c.

Number of Water Sources determined to be unsuitable. **The condition of these Water Sources MUST be documented in the comments below or in an attachment.**

Number of Water Sources suitable for testing whose owners refused to grant access despite an operator's reasonable good faith efforts to obtain consent to conduct sampling.
The reasonable good faith efforts used to obtain access from the owners of these Water Sources MUST be documented in the comments below or in an attachment.
- ☐ Request a Previously Sampled Water Source in the COGIS database be used to meet sampling requirements as described in Rule 609.d(3)

Type of Sample Substitution Request

Enter Sample ID Number from COGIS Maps for each Previous Water Sample:

Sample ID	Facility ID	Sample Date	Sample Purpose

COMMENTS

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Operator Comments:

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

Signed: _____ Print Name: Heather Shideman
Title: Environmental Scientist Email: hshideman@cbmainc.com Date: 3/31/2014

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

COGCC Approved: KOEPSSELL, ARTHUR Date: 4/1/2014

CONDITIONS OF APPROVAL, IF ANY:**COA Type****Description**

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General Comments**User Group****Comment****Comment Date**

Environmental Data	Operator has addressed potentially available water sources within the governmental quarter section of the proposed oil and gas well and within any governmental ¼ section within a ½ mile radius of the proposed oil and gas well. Documentation has been provided in the attachments.	4/1/2014 12:21:29 PM
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Total: 1 comment(s)

Attachment Check List**Att Doc Num****Name**

400579320	FORM 4 SUBMITTED
400579324	OTHER

Total Attach: 2 Files