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Document Number: <div>400720239</div>			
Date Received:			

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: <div>47120</div>	Contact Name <div>Cheryl Light</div>	<div>Complete the Attachment Checklist</div> <div>OP OGCC</div>
Name of Operator: <div>KERR MCGEE OIL & GAS ONSHORE LP</div>	Phone: <div>(720) 929-6461</div>	
Address: <div>P O BOX 173779</div>	Fax: <div>(720) 929-7461</div>	
City: <div>DENVER</div> State: <div>CO</div> Zip: <div>80217-3779</div> Email: <div>cheryl.light@anadarko.com</div>		
API Number : <div>05-1231543500</div>	OGCC Facility ID Number: <div>247638</div>	Survey Plat
Well/Facility Name: <div>HSR-ACKER</div>	Well/Facility Number: <div>1-36</div>	Directional Survey
Location QtrQtr: <div>NENE</div> Section: <div>36</div> Township: <div>4N</div> Range: <div>66W</div> Meridian: <div>6</div>		Srfc Eqpmt Diagram
County: <div>WELD</div> Field Name: <div>WATTENBERG</div>		Technical Info Page
Federal, Indian or State Lease Number: <div>67677</div>		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

NENE

 Sec

36

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

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 Twp Range

New **Bottomhole** Location Sec Twp Range

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

800

FNL

FEL/FWL

800

FEL

Twp

4N

Range

66W

Meridian

6

Twp

Range

Meridian

** attach deviated drilling plan

CHANGE OR ADD OBJECTIVE FORMATION AND/OR SPACING UNIT				
Objective Formation	Formation Code	Spacing Order Number	Unit Acreage	Unit Configuration

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

HSR-ACKER

Number

1-36

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 11/12/2014

☐ 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:

1 ND BOP. Unland production casing (4-1/2", 11.6#, I-70), ND surface casing head and NU double entry flange. 1992 vintage casing, don't pull with more than 100,000lbs (50% of virgin joint strength).

2 Spot concentrated mud flush (Alcomer 74L – liquid mud thinner in 5 gallon bucket) from Imperial.

3 Spot 49 jnts of TBG (1-1/4", 2.33#, J-55, IJ). Run in annulus with pup jnt with CutRight, burn shoe or mule shoe on 1-1/4" tbg to 1500' or as deep as possible while circulating. Use mud flush sweeps intermittently or as necessary. If TBG hits tight spots work it for a bit while circulating to break the bridge as best possible. Call engineering if there is difficulty making depth or if a power swivel is necessary to break bridging.

4 Once EOT of 1-1/4" is at 1500' circulate another 4 hours minimum using at least 1 mud flush sweep.

5 Order and pump 15 bbls of 10# mud from Imperial. Displace with 1 bbl of fresh fresh water to prevent unbalanced flow back. Note: Don't put mud in tanks contaminated with mud flush.

6 Pull 1-1/4" TBG up annulus so EOT at +/- 1,310'.

7 MIRU cementing services.

8 Mix & pump as follows: 5 bbls fresh water, 10 bbls Sodium Metasilicate (SMS), 10 bbl fresh water spacer, 325 sks Type III cement, 1/4#/sk Cello Flake, mixed at 14.8 ppg and yield of 1.33 cuft/sk (CaCl2 amounts as determined by cementing service company for a 3 hour pumping time at 80° F) for a total of 77.0 bbl of cement. Design is for coverage from 1310' to 432' in 9.5" Borehole (has no caliper log) and 102' in 8.1" with a 20% excess (has caliper log). See Calculation if necessary.

9 POOH with 1-1/4" tbg to +/- 230 and circulate until clean.

10 POOH and SB tbg. ND double entry flange and Re-Land the 4-1/2" production casing immediately.

11 NU tubing head, be sure it is a 5,000 psi rated unit. NU BOP.

12 Shut in and WOC for 24 hrs minimum.

13 MIRU Wireline services. PU and RIH w/ CCL-CBL-VDL tools and log from 1500' to surface. NOTE: IF TOC IS BELOW 430' OR POOR BOND, CONTACT EVANS ENGINEERING. Email logs to Jacob.Barker@Anadarko.com. Email copies of logs, summaries and invoices to rscDJVendors@Anadarko.com within 24hrs.

14 POOH, RDMO Wireline service company.

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

No BMP/COA Type

Description

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Operator Comments:

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>
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Total: 0 comment(s)

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
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400720242	OTHER
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Total Attach: 1 Files