

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: 400814769			
Date Received: 03/25/2015			

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 22577 00 OGCC Facility ID Number: 274772
 Well/Facility Name: ANDERSON Well/Facility Number: 10-34
 Location QtrQtr: NWSE Section: 34 Township: 3N Range: 68W 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:

FNL/FSL		FEL/FWL	
<input type="text" value="2025"/>	<input type="text" value="FSL"/>	<input type="text" value="2150"/>	<input type="text" value="FEL"/>

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

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------

Current **Surface Location From** QtrQtr Sec

Twp Range Meridian

New **Surface Location To** QtrQtr Sec

Twp Range Meridian

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

<input type="text" value="2100"/>	<input type="text" value="FSL"/>	<input type="text" value="2050"/>	<input type="text" value="FEL"/>
-----------------------------------	----------------------------------	-----------------------------------	----------------------------------

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

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	**
----------------------	----------------------	----------------------	----------------------	----

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

Twp Range

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

Twp Range

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

<input type="text" value="2100"/>	<input type="text" value="FSL"/>	<input type="text" value="2050"/>	<input type="text" value="FEL"/>
-----------------------------------	----------------------------------	-----------------------------------	----------------------------------

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

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	**
----------------------	----------------------	----------------------	----------------------	----

Current **Bottomhole Location** Sec Twp Range

** attach deviated drilling plan

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 _____

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 03/30/2015

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:

Attached procedure replaces Form 4 filed on 09/19/2014 (400691721) approved 09/25/2014

1. Well has Gyro 2013
- 2 Call IOC (970.506.5980) before rig up to isolate production equipment. Catch and remove plunger. Enter plunger into PLUNGER DATABASE. Call 24 hours prior to the rig moving onto location so that any automation equipment can be removed prior to the rig showing up. Install fence if needed. If surface casing is not accessible at ground level, re-pipe so valve is at ground level.
- 3 Check for surface casing pressure, bleed off as necessary.
- 4 Level location for base beam rig.
- 5 MIRU Cable slickline service company. RIH to retrieve production equipment. RIH and tag for fill, unknown last cleanout to 7448'. Note tagged depth in OpenWells.
- 6 MIRU Workover (WO) Rig. Control well with biocide treated water. Nipple Down (ND) Wellhead (WH) and Nipple Up (NU) Blow Out Preventer Equipment (BOP). Function test and document BOP. Unseat landing joint and lay down (LD).
- 7 Spot 7 jnts 2-3/8" / 4.7#/J55 8rd EUE tbg for cleanout and replacement. Tie into 2-3/8" tbg string. Cleanout to 7448'.
- 8 MIRU EMI services. EMI 2-3/8" TBG on TOO H and tally while standing back. Lay down joints with wall loss or penetrations > 35%. Replace bad joints as necessary. Note joint number and depth of bad tubing and create Production Equipment Failure Report in OpenWells. RDMO EMI services.
- 9 PU TIH with 2-3/8" TBG and RBP rated to 10,000 psi (4-1/2", 11.6#, I-80) and set at +/- 7,040' (reference Schlumberger Wireline CBL dated 10/17/2005 – collars are at 7032' and 7074').
- 10 Pressure test RBP/casing through tubing with BOP to 1000 psi using water w/ biocide for 15 min. If pressure test fails, contact Evans office for possible change in procedure.
- 11 TOO H with 2-3/8" and SB.
- 12 PU and RIH w/ CCL-CBL-VDL tools and log from 1,200' to surface with 1000 psi casing pressure. Clear with Evans engineering and email logs to Anne.Kremer@Anadarko.com before proceeding – Email copies of logs, summaries and invoices to rscDJVendors@Anadarko.com within 24hrs. If cement from surface to 213' is not present:
- 13 Bleed off pressure. ND BOP's, ND wellhead, Un-land 4 1/2" casing, NU dual entry flange, NU BOP.
14. PU 1.66" 2.3#/ft J-55 10rd IJ tubing, and TIH outside 4-1/2" casing in open hole to TOC at approx. 980'. Circulate with the rig pump while TIH to clean up the annulus. Use two sweeps of Alcomer 74L while TIH and a final sweep at 980', circulate until well is dead. Make sure no pressure is present on bradenhead before moving on to the next step. If gas is detected, contact engineering to discuss plan moving forward.
- 15 MIRU cement services. Pump: 5 bbl water w/biocide, 20 bbl Sodium Metasilicate, and another 5 bbl spacer immediately preceding cement. Pump 90 cu ft/? sx Type III CaCl2 cement w/0.25 pps cello flake mixed at 14.8 ppg and 1.33 cf/sx from to place cement from 980' to 675' (8.25" hole avg from caliper, adding 20% excess, and 675' to 575' inside 7-7/8" surface casing).
- 16 PUH to 375' and circulate 1.5 times the hole volume of water or until no cement returns are seen. TOO H with 1.66" tubing.
- 17 RDMO cementing company.
- 18 ND BOP. ND dual entry flange and crossover. Pick up and land 4-1/2" casing in slips.
- 19 Install new GE 5000 psi 4-1/2" bottom threaded tbg head with 7-1/16" flanged top, 7-1/16" flanged 5000 psi tbg head adaptor with 2-1/16" studded top, 2-1/16" flanged 5000 psi master valve, flanged 5000 psi 2-3/8" plunger lubricator (side outlets threaded). All valves, fittings, plugs on well head need to be rated for 5000 psi. NU BOP.
- 20 Leave well shut in for ~24hrs.

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

Operator Comments:

MIRU wireline and run CCL-GR-CBL-VDL from 1200' to surface. Send CBL to anne.kremer@anadarko.com. If new top of cement is below 575' notify Engineering. In addition to normal handling of logs/job summaries, email copies of all cement job logs/job summaries and invoices to rscDJVendors@anadarko.com within 24 hours of the completion of the job.

22 RDMO wireline.
 23 PU and TIH with 2-3/8" tbg and retrieving head. Circulate sand off RBP at @ +/-7,040'. TOOH with RBP and SB tbg.
 24 TIH with 2-3/8" NC, 2-3/8" XN SN and 2-3/8" 4.7# J55 EUE tbg, cleanout as necessary. Land tbg @ +/- 7280' (1 jt above top Codell perf).
 25 Broach tubing to seating nipple. ND BOP's, NU master valve and tubing head adaptor.
 26 GE should pressure test tbg head through test port on side of tbg head adaptor flange to 5000 psi for 15 mins.
 27 RDMO WO rig.
 28 Clean location and swab well back to production. Notify Field Foreman/Field Coordinator of finished work and turn well back 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: 3/25/2015

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: 3/29/2015

CONDITIONS OF APPROVAL, IF ANY:

<u>COA Type</u>	<u>Description</u>
	1) The additional cement referenced shall be placed as indicated and comply with Rule 317.j. The placed cement shall be verified with a CBL and documented with a Form 5 Drilling Completion Report. 2) Please submit gyro survey data with Form 5 Drilling Completion Report.

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineer	Changing previously approved procedure (perf and squeeze) to annular fill whcih will relieve Bradenhead pressure.	3/29/2015 4:17:23 PM

Total: 1 comment(s)

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400814769	FORM 4 SUBMITTED
400814773	OTHER

Total Attach: 2 Files