

**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: <b>400851314</b>			
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**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 12776 00 OGCC Facility ID Number: 244981  
 Well/Facility Name: STARCK Well/Facility Number: 2  
 Location QtrQtr: SWSW Section: 18 Township: 4N 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 SWSW Sec 18

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 \_\_\_\_\_

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	
990	FSL	990	FWL
Twp <u>4N</u>	Range <u>67W</u>	Meridian <u>6</u>	
Twp _____	Range _____	Meridian _____	
			**
Twp _____	Range _____		
Twp _____	Range _____		
			**

\*\* attach deviated drilling plan



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    06/23/2015

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:**

1 Well needs remedial cement over the top of Nio, packer and new wellhead. Currently has a 3k wellhead. Well is 1832' offset to PDC's RIEDER pad. Gyro was run on 01/28/2015 to 7550'.

2 Call Foreman or Field Coordinator 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. NOTE: Report surface casing pressure to engineer. If surface casing is not accessible at ground level, re-pipe so valve is at ground level.

3 Level location for base beam rig.

4 MIRU slickline. RIH to retrieve production equipment. RIH and tag for fill. Last tag was to 7550' on 1/28/2015. RDMO slickline.

5 MIRU WO Rig. Control well with biocide treated water. ND WH and NU BOPE.

6 Unland 2-3/8" tbg and LD landing joint.

7 MIRU EMI services. EMI 2-3/8" TBG while TOO (Do not exceed 39,560 lb when pulling) 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.

8 Clean out well by bailing sand if slickline indicates fill over the perforations.

9 PU scraper for 4-1/2" 11.6# casing and RIH to 6750' Reciprocate across interval at 6720', then PUH and reciprocate across interval at 6370'. POOH and LD scraper.

10 PU CIBP (4.5", 11.6#, K-55) and 2-3/8" tubing and set CIBP at +/- 6720'. Nearest collars at 6704' and 6746'.

11 Release tbg from CIBP and circulate all gas out of the hole. Pumping water with biocide, pressure test CIBP and production casing to 1,000 psi for 15 minutes to verify CIBP set. If pressure test passes, proceed; otherwise contact engineering.

12 Dump 2 sx of sand on CIBP. TOO and SB tubing.

13 RU WL. PU 1-1-ft, 3 spf, 0.59" EHD, 4.725" PEN. squeeze hole guns. RIH and shoot 1-ft at 6570'. POOH. RDMO WL.

14 PU CICR for 4-1/2" 11.6# casing on 2-3/8" tbg and hydrotest to 6000 psi while RIH to +/- 6370' pending CCL run

15 Using rig pump, establish circulation down tbg up the surface casing. Well may not circulate but instead go into the Sussex, which is OK. Monitor Bradenhead pressure while pumping.

16 RU Cementers. Pumping down tbg up Bradenhead, pump 80 sx (~133 cuft) 1:1:3 'Poz:G:Gel' w/ 20% silica, 0.4% CFL-3, 0.4% CFR-2, 0.1% SMS mixed at 13.5 ppg and 1.66 cuft/sk yield. Volume based on 9-1/4" x 4-1/2" annulus with 20% excess from 6570' to 6370'.

17 Underdisplace cement by 1 bbl and unsting from CICR and spot final 1 bbl of cement on top of the CICR. POOH and SB. WOC per cement company recommendations.

18 PU 3-7/8" bit and RIH to tag cement at ~6300'. Drill out cement, CICR, cement under the CICR. Continue to RIH to the sand capped CIBP. POOH and LD bit.

19 RU WL. Run CBL from 6700' to 6000' to verify cement coverage. Tie into the Schlumberger CBL dated 12/5/1985 in the log file room. RD WL.

20 ND BOP. Replace casing valves and nipples with components rated to 5000 psi.

21 ND existing tubing head off the 4.5" casing and install new WHI 5,000 psi flanged tubing head complete with 5000 psi rated casing valves, and XXH nipples.

22 NU BOP.

23 PU 3-7/8" bit and RIH to the sand capped CIBP at 6720'. Drill out CIBP and push to bottom. POOH and LD bit.

24 Clean out well by bailing sand if slickline indicates fill over the perforations.

25 PU 2-3/8" NC, 2-3/8" XN profile nipple and 2-3/8" tbg (make sure nipple is properly input into OpenWells), land tubing with EOT at +/- 7628'.

26 RU rig lubricator. Broach tbg to seating nipple. RD rig lubricator.

27 ND BOP. NU wellhead.

28 Install 2-3/8" pup joint above master valve. Pressure test tbg head from below tbg head through master valve with hydrotester to 5,000psi.

29 RDMO WO rig

30 Return well to production team

**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:

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: 6/9/2015

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

COGCC Approved: JENKINS, STEVE Date: 6/16/2015

**CONDITIONS OF APPROVAL, IF ANY:**

<u>COA Type</u>	<u>Description</u>

**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>
400851314	FORM 4 SUBMITTED
400851317	OTHER

Total Attach: 2 Files