

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: 400931570 | | | |
| Date Received: 11/05/2015 | | | |

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 16696 00 OGCC Facility ID Number: 248894
 Well/Facility Name: HSR-GOLDSMITH Well/Facility Number: 11-31
 Location QtrQtr: NESW Section: 31 Township: 4N Range: 66W Meridian: 6
 County: WELD Field Name: WATTENBERG
 Federal, Indian or State Lease Number: 60719

| | | |
|---------------------|--|--|
| 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 |
| 1863 FSL | 2115 FWL |

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

| | |
|--|--|
| | |
|--|--|

Current **Surface** Location **From** QtrQtr NESW Sec 31

| | | |
|---------------|------------------|-------------------|
| Twp <u>4N</u> | Range <u>66W</u> | Meridian <u>6</u> |
|---------------|------------------|-------------------|

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

| | | |
|-----------|-------------|----------------|
| Twp _____ | Range _____ | Meridian _____ |
|-----------|-------------|----------------|

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 _____

| | |
|-----------|-------------|
| Twp _____ | Range _____ |
|-----------|-------------|

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

| | |
|-----------|-------------|
| Twp _____ | Range _____ |
|-----------|-------------|

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

| | |
|--|--|
| | |
|--|--|

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

| | | |
|--|--|----|
| | | ** |
|--|--|----|

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 11/23/2015

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:

Goldsmith 11-31 – Annular Fill Procedure

- 1 Call Wattenberg IOC (970-506-5980) at least 24 hrs prior to rig move. If not already completed, request that they catch and remove plunger, isolate production equipment and remove any automation equipment prior to the rig showing up. Install perimeter fence as needed.
- 2 Check bradenhead for pressure. A form 17 has not been performed. Record pressure if any.
- 3 MIRU Slick line. Fish plunger if necessary and tag for PBTD.
- 4 Prepare location for base beam rig.
- 5 Spot 1200' of 1.66" 2.33# J-55 10rd IJ tbg.
- 6 Check wellhead for 5,000 psi rating. If wellhead is not rated to 5,000 psi, install one that is prior to completing the job.
- 7 MIRU WO rig. Kill well with fresh water with biocide. ND wellhead, NU BOP.
- 8 Run two 2" lines from starting head to return tanks.
- 9 Unseat tbg hanger and LD tbg hanger and landing joint. Install rubber wiper in stripping head.
- 10 MIRU EMI equipment. TOO H with 2-3/8" tbg. EMI tbg while TOO H. Lay down joints with wall loss or penetrations >35%. Replace joints as necessary. Keep yellow and blue band tubing. Note joint number and depth of tubing leak(s) on production equipment failure report in OpenWells. Clearly mark all junk (red band) tubing sent to yard.
- 11 PU and TIH with 2-3/8" tbg with 4-1/2" RBP for 11.6# casing. Set RBP at +/- 6120'. Pressure test RBP to 1,000 psi for 15 minutes. Spot 2 sx sand on top of RBP. TOO H. SB tbg.
- 12 ND BOP, ND tubing head. Un land 4-1/2" 11.6# csg. NU double entry flange, NU BOP.
- 13 PU and TIH with 1.66" 2.33# J-55 10rd IJ tbg outside 4 1/2" csg to +/- 1200' with alcomer sweeps while running in.
- 14 Circulate 150 bbls with rig pump (Circulate at least 1.5x annular volume from 1200') or until well is dead.
- 15 TUH to 1050'.
- 16 MIRU Cement company. Commence pumping cement job consisting 5 bbl fresh water, 20 bbl sodium meta silicate and 5 bbl fresh water; 360 cuft (270 sx) of Type III + 0.3% CFL-3 + 0.3% CFR-2 + 0.5% CaCl2 + 0.25 lb/sk Polyflake mixed at 14.8 ppg and 1.33 cuft/sk. (Cement from +/- 1050' to 350').
- 17 TOO H with 1.66" 2.33# and LD.
- 18 Break lines and clean up with fresh water. RMDO cement company.
- 19 ND BOP, ND double entry flange, re-land 4-1/2" csg NU BOP.
- 20 Leave well shut in for minimum of 24 hours.
- 21 MIRU wire line and run CCL-GR-CBL-VDL from 1500' to surface. If Fox Hill plug is not above 350', contact engineering for further instructions. RDMO wire line.
- 22 Pressure test casing to 1,000 psig. If pressure test does not hold call engineering.
- 23 TIH with 2-3/8" tbg and retrieving head and tag sand above RBP @ +/- 6120'. Circulate sand off RBP, latch onto RBP and TOO H. SB tbg, LD RBP.
- 24 PU and TIH with 2-3/8" XN, 2-3/8" tbg and 4-1/2" production packer. Land EOT at +/- 7250' with the packer being set at +/- 6870'. Set packer and land tbg string
- 25 ND BOP, NU master valve.
- 26 Install 7 1/16" x 5,000 psi tubing head adaptor with new 5,000 psi master valve threaded 2 1/16" connection. Make sure all wellhead valves are rated to 5,000 psi.
- 27 Install 2 3/8" pup joint above the master valve. Pressure test the tubing head from below the tubing head through the master valve to 5,000 psi with hydro tester. NU 5k wellhead.
- 28 RMDO WO rig. Return well to production team.
- 29 Clean location and swab well back to production. Notify field foreman/field coordinator of finished work and turn well back over 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:

| <u>Best Management Practices</u> | |
|---|---------------------------|
| <u>No BMP/COA Type</u> | <u>Description</u> |
| | |

Operator Comments:

[Empty text box for 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: 11/5/2015

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: 11/5/2015

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> |
|--------------------|------------------|
| 400931570 | FORM 4 SUBMITTED |
| 400931571 | OTHER |
| 400931572 | WELLBORE DIAGRAM |

Total Attach: 3 Files