

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: 401373770			
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: 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 19735 00 OGCC Facility ID Number: 251930
 Well/Facility Name: HSR-MATSUSHIMA Well/Facility Number: 5-35A
 Location QtrQtr: SWNW Section: 35 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		

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:

2180	FNL	460	FWL

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

Current Surface Location From	QtrQtr	<u>SWNW</u>	Sec	<u>35</u>	Twp	<u>3N</u>	Range	<u>67W</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	
New Bottomhole Location	Sec		Twp		Range	

** attach deviated drilling plan

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 08/18/2017

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:

ANNULAR FILL/Packer/WH Replacement
1 Well needs a single stage annular fill (FH), packer, WH change & pressure test to 5K. Ensure form 42 has been filed with the state.
2 Well has GYRO from 09/16/2014.
3 The most recent bradenhead report (02/08/2017) shows 1 psi and no fluids produced.
4 Call foreman and/or field coordinator 24 hours before rig up to isolate any production equipment (remove plunger, wellhead automation, etc.). Prepare to move base beam rig onto location. Install perimeter fence if needed. Operations needs to bleed off the bradenhead pressure before the rig gets on location.
5 Check and report surface casing pressure. If valve is not accessible at ground level, re-plumb so valve is at ground level.
6 MIRU Slickline. RIH to retrieve production equipment and tag for fill. Note tagged depth in OpenWells. RDMO Slickline.
7 MIRU WO rig. Kill well as necessary with biocide treated fresh water. Spot in 25 jts of 2-3/8" 4.7# J-55 EUE tbg and 50 jts of 1.66" 2.33# J-55 10RD tbg. ND wellhead. NU 5,000 psi rated BOP. Unland 2-3/8" tbg, using unlanding joint and LD.
8 MIRU EMI services. TOOH testing tubing, and SB 7324' 2-3/8" tbg. LD remainder. LD all bad joints and record depths in OW.
9 PU and TIH with (4-1/2", 11.6#) bit and scraper on 2-3/8" tbg to 7020'. TOOH and SB all 2-3/8" tbg. LD bit and scraper.
10 PU and TIH with 10,000 psi rated (4-1/2", 11.6#) RBP on 2-3/8" tbg. Set RBP at 7020' (within 100' of top perfs at 7840').
11 Load hole with biocide treated fresh water and circulate all gas from well. Pressure test to 500psi at surface. If test confirms that plug is set, dump 2 sx of sand on top of RBP.
12 TOOH and SB all 2-3/8" tbg. LD setting tool.
13 ND BOP and WH. Un-land casing using a casing spear, not a lifting sub. Rig max pull shall be 100,000#. Max pull over string weight shall be 50,000#. If unable to unland, contact Engineering.
14 NU double entry flange and BOP. Install 1.66" pipe rams.
15 PU 1130' 1.66" 2.33# J-55 10RD tbg and TIH in annulus between production casing and surface casing/open hole to 1130' while continuously circulating. Circulate at least 2 sweeps of DF 20-20 (annular volume is 115 bbls based off 715' of 7.88" bit size OH with 100% excess and 415' of surface casing while not including the production casing's capacity).
16 Using the rig pump, circulate a minimum of 1.5 annular volumes to condition the hole and until well is dead. Pump a final sweep of DF 20-20 at 1130'. If unable to circulate dead, contact Engineering.
17 MIRU Cementers. Pump Fox Hills Annular Fill: Establish circulation and pump the following in sequential order: 5 bbls of water, 10 bbls of sodium silicate, and 5 bbls fresh water spacer. Pump 235 sx (350 cf, 63bbl) assuming 0.25 lb/sk polyflake 15.8 ppg & 1.50 cf/sk. Volume is based off 715' of 7.88" bit size OH with 100% excess and 100' of surface casing/production casing annulus. RDMO Cementers.
18 Slowly pull out of the cement and PUH to 100'. Reverse circulate tbg clean to ensure no cement is left in the tbg.
19 TOOH and LD all 1.66" tbg. ND BOP and double entry flange. Use 4-1/2" casing spear to re-land 4-1/2" casing. NU new 5,000 psi rated flanged tbg head with 5,000 psi rated casing. NU BOP. Install 2-3/8" pipe rams. Shut in well and WOC for a minimum of 24 hours.
20 MIRU WL. Well needs CBL. PU and RIH with CCL-GR-CBL-VDL. Run log from 1500' to surface. Report cement tops in OpenWells. Email results to Engineering and DJVendors@anadarko.com within 24 hours of job completion. RDMO WL.
21 PU and TIH with retrieving head on 2-3/8" tbg.
22 Latch onto and release RBP at 7020'. TOOH and SB all 2-3/8" tbg. LD retrieving head and RBP.
23 MIRU Hydrotester. PU and TIH with 2-3/8" NC, 2-3/8" XN nipple, 9 joints of 2-3/8" tbg, Arrowset Packer, and 2-3/8" tubing to surface while hydrotesting to 3000 psi. Land EOT at +/-7325, with packer set at 7020'. RDMO Hydrotester.
24 Pressure test 2-3/8" x 4-1/2" to 500psi to ensure packer set.

2

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:

24 Pressure test 2-3/8" x 4-1/2" to 500psi to ensure packer set.
 25 RU rig lubricator. Broach tbg to XN nipple. RD rig lubricator.
 26 ND BOP, NU 7-1/16" x 5,000 psi flanged tbg head adaptor with new 5,000 psi flanged master valve with flanged 2-3/8" 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 tbg head from below the tbg head through the master valve to 5,000 psi. If wellhead does not pressure test, replace wellhead/wellhead valves as necessary with 5,000 psi rated equipment.
 28 RDMO WO rig. Return well 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: _____

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:

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

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401373780	OTHER
401373781	WELLBORE DIAGRAM

Total Attach: 2 Files