

State of Colorado
Oil and Gas Conservation Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203
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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 07875 00	OGCC Facility ID Number:	240087
Well/Facility Name:	FLORENCE BERRY UNIT		Well/Facility Number: 1
Location QtrQtr:	SESW	Section:	26 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:Change of **Surface** Footage **To** Exterior Section Lines:Current **Surface** Location **From** QtrQtr **SESW** Sec **26**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	
1150	FSL	1640	FWL
Twp 3N	Range 67W	Meridian 6	
Twp	Range	Meridian	
			**
Twp	Range		
Twp	Range		
			**
			** attach deviated drilling plan

CHANGE OR ADD OBJECTIVE FORMATION AND/OR SPACING UNIT

<u>Objective Formation</u>	<u>Formation Code</u>	<u>Spacing Order Number</u>	<u>Unit Acreage</u>	<u>Unit Configuration</u>

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 FLORENCE BERRY UNIT Number 1 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 09/22/2017

☐ 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 Management 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:

Retainer Suicide Squeeze (Bradenhead), Nio Squeeze, Packer, and Wellhead

1. Well needs a retainer suicide squeeze from 1000'-600' for bradenhead issues, Niobrara squeeze, a packer, and wellhead.
2. Well has gyro ran on 02/12/2015.
3. MIRU Slickline. Pull production equipment. Record tag depth in OpenWells. RD slickline.
4. Prepare location for base beam equipped rig. Install perimeter fence as needed.
5. Check and record bradenhead pressure. If bradenhead valve is not accessible, re-plumb so that valve is above GL. Blow down bradenhead and re-check pressure the next day. Repeat until pressure stays at 0 psi.
6. MIRU WO rig. Spot 25 jts of 2-3/8" 4.7# J-55 tbg.
7. Kill well as necessary with biocide treated freshwater. Attach a hardline from the bradenhead/surface casing valve to a flowback tank and blowdown any bradenhead pressure. If pressure does not blow down within 1 hour contact engineer, otherwise proceed.
8. ND wellhead, NU BOP.
9. PU 8-10' pup joint with TIW valve on top and screw into the tbg hanger. Unseat and LD the landing joint.
10. MIRU EMI services. EMI 2-3/8" tbg while TOO H and tally while standing back. Lay down joints that have greater than 35% penetration or wall loss. Replace all joints that fail EMI testing. Document joint numbers and depth of bad tubing and create a Production Equipment Failure Report in OpenWells. RDMO EMI services.
11. PU and TIH with (4.5", 10.5#) Bit and Scraper on 2-3/8" tubing to 7710'. TOO H and SB all tbg. LD Bit and Scraper.
12. MIRU WL. PU and RIH with (4.5", 10.5#) CIBP. Set CIBP at +/- 7700'. POOH. RDMO WL.
13. TIH with 2-3/8" tbg to 7700'. Pumping biocide treated fresh water, circulate gas out, pressure test CIBP and production casing to 500 psi for 15 minutes. If test fails, contact Engineering.
14. TOO H and SB all 2-3/8" tubing.
15. MIRU WL and run CCL-GR-CBL-VDL from +/- 7700' to surface to confirm squeeze hole and collar locations. Forward to Engineering. In addition to normal handling, of logs/job summaries, email copies of all cement job logs/job summaries and invoices to DJVendors@anadarko.com within 24 hours of completion of the job.
16. PU and RIH with two 1' 3-1/8" perf guns with 3 spf, 0.5" EHD, 120° phasing. Shoot 1' of squeeze holes at 7300' and 6655'. POOH. RDMO WL.
17. PU and TIH with (4.5", 10.5#) CICR on 2-3/8" tbg while hydrotesting to 4000 psi and set at +/- 6685'. Establish circulation through squeeze holes with biocide treated freshwater and circulate a minimum of 200 bbls through squeeze holes. If rate is less than 1 bpm at 1000 psi, contact engineer.
18. MIRU Cementing. Establish circulation and pump 20 bbls (5 bbls of water, 10 bbls of sodium silicate, and 5 bbls water) spacer, 185 sx Niobrara Squeeze cement (279 cf, 49.8 bbls) 15.8 ppg, 1.51 yld. Underdisplace by 3 bbls. Calculations based on 645' in the annulus between 7.88" hole and 4.5" casing with 40% excess, 615' below CICR in 4.5" casing, and 188' above CICR. Attempt to cement from 7300' to 6655'.
19. PUH to 6000' and reverse circulate tbg clean to ensure no cement is left in tbg. TOO H. SB all tbg. LD stinger.
20. MIRU WL. PU and RIH with two 1' 3-1/8" perf guns with 3 spf, 0.5" EHD, 120° phasing. Shoot 1' of squeeze holes at 1000' and 600'. POOH. RDMO WL.
21. PU and TIH with (4.5", 10.5#) CICR on 2-3/8" tbg and set at +/- 630'. Establish circulation through squeeze holes with biocide treated freshwater and circulate a minimum of 200 bbls through squeeze holes. If rate is less than 1 bpm at 1000 psi, contact engineer.
22. MIRU Cementing. Establish circulation and pump 20 bbls (5 bbls of water, 10 bbls of sodium silicate, and 5 bbls water) spacer, 130 sx Fox Hills Squeeze cement (196.3 cf, 35 bbls) 15.8 ppg, 1.51 yld. Underdisplace by 3 bbls. Calculations based on 400' in the annulus between 7.88" hole and 4.5" casing with 60% excess, 370' below CICR in 4.5" casing, and 188' above CICR. Attempt to cement from 1000' to 600'.

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:

23. PUH to 300' and reverse circulate tbg clean to ensure no cement is left in tbg. TOOH, SB all tbg. LD stinger. WOC 24 hours.
24. PU and TIH with 3-7/8" bit and appropriate number of 3-1/2" drill collars on 2-3/8" tbg. Time drill cement above CICR (~188'). If ROP is faster than 2 min/ft, SD and WOC 24 hours and repeat. Drill down to CICR located at +/- 630'. Pressure test top holes to 500 psi for 5 minutes. Drill CICR and cement past lower perf at 1000' and pressure test to 500 psi for 5 minutes. Repeat for CICR at 6685'.
25. TOOH and SB tbg, LD drill collars, LD bit.
26. MIRU WL and run CCL-GR-CBL-VDL from +/- 7500' to surface. Forward to Engineering. In addition to normal handling, of logs/job summaries, email copies of all cement job logs/job summaries and invoices to DJVendors@anadarko.com within 24 hours of completion of the job.
27. PU and TIH with bit on 2-3/8" tbg. Drillout CIBP at +/- 7700 and chase down to 7921'.
28. TOOH. SB all tbg. LD bit.
29. PU 2-3/8" NC, 2-3/8" XN nipple (be sure to correctly input into OpenWells), ~24 jts of 2-3/8" tbg (to set packer at 7000'), 4-1/2" Arrowset AS-1X packer (10k rated above and below), and 2-3/8" 4.7# J-55 tbg to surface.
30. Set packer at +/- 7000'. Load backside with packer fluid and test to 500 psi.
31. RU rig lubricator. Broach tubing to XN seating nipple. RD rig lubricator. ND BOP.
32. Install 7-1/16" flanged 5000 psi tubing head adaptor with studded top, 2-1/16" flanged 5000 psi master valve, flanged 5000 psi 2-3/8" plunger lubricator (side outlets threaded). Make sure all wellhead valves are rated to 5,000 psi. Document wellhead components in an OpenWells wellhead report.
33. 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 using hydrotester. If wellhead does not pressure test, replace wellhead/wellhead valves as necessary with 5,000 psi rated equipment.
34. NU WH. 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:**COA Type****Description**

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General Comments**User Group****Comment****Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)

Attachment Check List**Att Doc Num****Name**

401408833	OTHER
401408834	WELLBORE DIAGRAM

Total Attach: 2 Files