

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203

Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number: 401513357			
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 Erik Mickelson	Complete the Attachment Checklist OP OGCC
Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP	Phone: (720) 929-4306	
Address: P O BOX 173779	Fax: ()	
City: DENVER State: CO Zip: 80217-3779	Email: Erik.Mickelson@anadarko.com	
API Number : 05- 123 46247 00	OGCC Facility ID Number: 453670	Survey Plat
Well/Facility Name: VERDE	Well/Facility Number: 13-7HZ	Directional Survey
Location QtrQtr: NENW Section: 13 Township: 1N Range: 66W Meridian: 6		Srfc Eqpmt Diagram
County: WELD Field Name: WATTENBERG		Technical Info Page
Federal, Indian or State Lease Number:		Other

GROUND WATER SAMPLING

Uses of Ground Water Sampling Section

Request an Exception to Ground Water Sampling Requirements in Greater Wattenberg Area Rule 318A.e(4) or in Statewide Rule 609.c. Request a Previously Sampled Water Source in the COGIS database be used to meet sampling requirements as described in Rule 609.d.(3).

NOTE: If this Sundry Notice is being submitted to request a Ground Water Sampling Exception it cannot be used for any other purpose except requesting the use of a Previously Sampled Water Source in the COGIS database.

- ☒ Request an Exception to Ground Water Sampling Requirements per Greater Wattenberg Area Rule 318A.e(4):There are no Available Water Sources located within the governmental quarter section or within a previously unsampled governmental quarter section within a ½-mile radius of this proposed Oil and Gas Well, Multi-Well Site, or Dedicated Injection Well.
- ☐ Request an Exception to Ground Water Sampling Requirements per Statewide Rule 609.c.

Number of Water Sources located within one-half (1/2) mile of a proposed Oil and Gas Well, Multi-Well Site, or Dedicated Injection Well.

Number of Water Source Exceptions requested per Rule 609.c.

Number of Water Sources determined to be unsuitable. **The condition of these Water Sources MUST be documented in the comments below or in an attachment.**

Number of Water Sources suitable for testing whose owners refused to grant access despite an operator's reasonable good faith efforts to obtain consent to conduct sampling.
The reasonable good faith efforts used to obtain access from the owners of these Water Sources MUST be documented in the comments below or in an attachment.
- ☐ Request a Previously Sampled Water Source in the COGIS database be used to meet sampling requirements as described in Rule 609.d(3)

Type of Sample Substitution Request

Enter Sample ID Number from COGIS Maps for each Previous Water Sample:

Sample ID	Facility ID	Sample Date	Sample Purpose

COMMENTS

A sample was collected in the SE quarter of Section 13 1N 66W for the Azul 13-13HZ Pad that will be uploaded once results are received. Sample date is 11/28/2017, Sample name is Thompson 43865, Facility ID is 757165. Sample purpose is 318A.f Initial. Multi-well exception also applies to Verde 13-8HZ API#05-123-46256, Verde 13-9HZ API#05-123-46252, Verde 13-10HZ API#05-123-46254, Verde 13-11HZ API#05-123-46248, Verde 13-12HZ API#05-123-46255, Verde 13-13HZ API#05-123-46250, Verde 13-14HZ API#05-123-46251, Verde 13-15HZ API#05-123-46253, Verde 13-16HZ API#05-123-46257, Verde 13-17HZ API#05-123-46249, Verde 13-18HZ API#05-123-46258.

Operator Comments:

Attn: Arthur Koepsell

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: Tanya Cude
Title: Environmental Scientist Email: Tanya.Cude@Absarokasolutions.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**

401513366	OTHER
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Total Attach: 1 Files