

**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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**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 Kelsi Welch  
 Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-3068  
 Address: P O BOX 173779 Fax: ( )  
 City: DENVER State: CO Zip: 80217-3779 Email: kelsi\_welch@oxy.com

**FORM 4 SUBMITTED FOR:**

Facility Type: WELL

API Number : 05- 123 51595 00 ID Number: 480759

Name: SBJ Number: 13-13HZ

Location QtrQtr: SWNW Section: 13 Township: 4N Range: 68W Meridian: 6

County: WELD Field Name: WATTENBERG

Oil & Gas Location(s) and Oil & Gas Development Plan (OGDP) Information

Location(s)

Location ID	Location Name and Number
479198	SBJ 22-13HZ PAD

OGDP(s)  
No OGDP

**WELL LOCATION CHANGE OR AS-BUILT GPS REPORT**

Change of Location for Well \*     As-Built GPS Location Report     As-Built GPS Location Report with Survey

\* Well Location Change requires a new Plat.

**SURFACE LOCATION GPS DATA**    Data must be provided for Change of Surface Location and As Built Reports.

Latitude \_\_\_\_\_ Longitude \_\_\_\_\_

GPS Quality Value: \_\_\_\_\_ Type of GPS Quality Value: \_\_\_\_\_ Measurement Date: \_\_\_\_\_

Well Ground Elevation: \_\_\_\_\_ feet (Required for change of Surface Location.)

**WELL LOCATION CHANGE**

Well plan is: \_\_\_\_\_ (Vertical, Directional, Horizontal)

				FNL/FSL		FEL/FWL				
Change of <b>Surface</b> Footage <b>From</b> :				<input type="text" value="2320"/>	<input type="text" value="FNL"/>	<input type="text" value="1099"/>	<input type="text" value="FWL"/>			
Change of <b>Surface</b> Footage <b>To</b> :				<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Current <b>Surface</b> Location <b>From</b>	QtrQtr	<input type="text" value="SWNW"/>	Sec	<input type="text" value="13"/>	Twp	<input type="text" value="4N"/>	Range	<input type="text" value="68W"/>	Meridian	<input type="text" value="6"/>
New <b>Surface</b> Location <b>To</b>	QtrQtr	<input type="text"/>	Sec	<input type="text"/>	Twp	<input type="text"/>	Range	<input type="text"/>	Meridian	<input type="text"/>
Change of <b>Top of Productive Zone</b> Footage <b>From</b> :				<input type="text" value="537"/>	<input type="text" value="FSL"/>	<input type="text" value="997"/>	<input type="text" value="FEL"/>			
Change of <b>Top of Productive Zone</b> Footage <b>To</b> :				<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		**	
Current <b>Top of Productive Zone</b> Location	Sec	<input type="text" value="14"/>	Twp	<input type="text" value="4N"/>	Range	<input type="text" value="68W"/>				
New <b>Top of Productive Zone</b> Location	Sec	<input type="text"/>	Twp	<input type="text"/>	Range	<input type="text"/>				

Change of **Base of Productive Zone** Footage **From:**

 FSL FEL

Change of **Base of Productive Zone** Footage **To:**

\*\*

Current **Base of Productive Zone** Location

Sec Twp Range 

New **Base of Productive Zone** Location

Sec Twp Range 

Change of **Bottomhole** Footage **From:**

 579 FSL 420 FWL

Change of **Bottomhole** Footage **To:**

\*\*

Current **Bottomhole** Location

Sec Twp Range 

\*\* attach deviated drilling plan

New **Bottomhole** Location

Sec Twp Range 

### SAFETY SETBACK INFORMATION

Required for change of Surface Location.

Distance from Well to nearest:

Building: \_\_\_\_\_ Feet  
 Building Unit: \_\_\_\_\_ Feet  
 Public Road: \_\_\_\_\_ Feet  
 Above Ground Utility: \_\_\_\_\_ Feet  
 Railroad: \_\_\_\_\_ Feet  
 Property Line: \_\_\_\_\_ Feet

#### INSTRUCTIONS:

- Specify all distances per Rule 308.b.(1).
- Enter 5280 for distance greater than 1 mile.
- Building - nearest building of any type. If nearest Building is a Building Unit, enter same distance for both.
- Building Unit – as defined in 100 Series Rules.

### SUBSURFACE MINERAL SETBACKS

Required for change of Top and/or Base of Productive Zone. Enter 5280 for distance greater than 1 mile.

Is this Well within a unit? \_\_\_\_\_

If YES:

Enter the minimum distance from the Completed Zone of this Well to the Unit Boundary: \_\_\_\_\_ Feet

Enter the minimum distance from the Completed Zone of this Well to the Completed Zone of an offset Well within the same unit permitted or completed in the same formation: \_\_\_\_\_ Feet

If NO:

Enter the minimum distance from the Completed Zone of this Well to the Lease Line of the described lease: \_\_\_\_\_ Feet

Enter the minimum distance from the Completed Zone of this Well to the Completed Zone of an offset Well producing from the same lease and permitted or completed in the same formation: \_\_\_\_\_ Feet

### Exception Location

If this Well requires the approval of a Rule 401.c Exception Location, enter the Rule or spacing order number and attach the Exception Location Request and Waivers. \_\_\_\_\_

### LOCATION CHANGE COMMENTS

### CHANGE OR ADD OBJECTIVE FORMATION AND/OR SPACING UNIT

Objective Formation	Formation Code	Spacing Order Number	Unit Acreage	Unit Configuration	Add	Modify	No Change	Delete
CODELL	CODL	407-3230	1640	4N68W: SEC 13 NW, W2			X	



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, as required by Rule 434.b.(3).

Date well temporarily abandoned \_\_\_\_\_

Has Production Equipment been removed from site? \_\_\_\_\_

Mechanical Integrity Test (MIT) required. Date of last MIT \_\_\_\_\_

**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/REQUEST FOR APPROVAL      Approximate Start Date 06/05/2022

SUBSEQUENT REPORT      Date of Activity \_\_\_\_\_

- |                                                                                                                                                           |                                                        |                                                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Bradenhead Plan                                                                                                                  | <input type="checkbox"/> Venting or Flaring (Rule 903) | <input type="checkbox"/> E&P Waste Mangement           |
| <input type="checkbox"/> Change Drilling Plan                                                                                                             | <input type="checkbox"/> Repair Well                   | <input type="checkbox"/> Beneficial Reuse of E&P Waste |
| <input type="checkbox"/> Gross Interval Change                                                                                                            |                                                        |                                                        |
| <input type="checkbox"/> Underground Injection Control                                                                                                    |                                                        |                                                        |
| <input type="checkbox"/> Request approval of Reuse and Recycling Plan per Rule 905.a.(3). (Reuse and Recycling Plan must be attached.)                    |                                                        |                                                        |
| <input type="checkbox"/> Request approval of Alternative Sampling Plan per Rule 909.j.(6). for this Pit. (Alternative Sampling Program must be attached.) |                                                        |                                                        |
| <input checked="" type="checkbox"/> Other Fishing job                                                                                                     |                                                        |                                                        |

Request that an existing produced water sample from the same formation be used per Rule 909.j.(6) to meet the requirements of Rule 909.j.(1)-(5) for this Well.

Pit ID \_\_\_\_\_ Pit Name \_\_\_\_\_

(No Sample Provided)

Subsequent well operations with heavy equipment (Rule 312)

(No Well Provided)

COMMENTS:

- 1. Wellhead and Surface Prep
  - a. SI adjacent wells and install protective wellhead cages
  - b. 10K primary and secondary master valves already installed and pressure tested.
  - c. Flowback equipment and lines are already installed and pressure tested.
- 2. Workover Rig
  - a. MIRU workover rig and unload workstring onto racks
  - b. NU BOP stack and rig-assist snubbing unit (RASU)
  - c. Pressure test BOP & RASU per API specs
  - d. SIH with workstring and venturi and clean out debris from fish top, SOOH
  - e. SIH with workstring, establish circulation, dress fish top, SOOH
  - f. SIH with overshot, engage coil fish, attempt to circulate & pull free
  - i. If fish pulls free:
    - 1. Pump kill fluid, POOH to surface
    - 2. With the coil tubing secured at surface, cut the tubing and lay it down
    - 3. Pull another section of coil out of the well and repeat the cutting process
    - 4. Repeat steps 2-3 until all the coil is out of the well
  - ii. If fish is still stuck:
    - 1. Release OS from fish or RU wireline to chemical cut off fish
    - 2. Pump kill fluid, TOO H to surface
    - 3. TIH with washpipe, establish circulation with kill fluid, wash down over fish, TOO H to surface
    - 4. TIH with OS, latch coil fish, attempt to pull free
    - 5. If fish comes free, follow step 2e.i.1 above
    - 6. If fish is still stuck, RU WL and chemical cut coil fish above deepest washover point
    - 7. POOH with washpipe & coil fish
    - 8. Strip & cut coil fish in ~30-40' sections with hydraulic cutter and lay down cut sections
    - 9. Repeat steps 2e.ii.3-8 until entire coil fish has been recovered
    - g. Once coil fish is out of the hole, TIH to retrieve coil BHA fish and POOH
    - h. Continue with normal production tubing snubbing operations

GAS CAPTURE

VENTING AND FLARING:

Operation type: \_\_\_\_\_ Operational phase requiring venting/flaring: \_\_\_\_\_

Reason for venting/flaring: \_\_\_\_\_

Describe Other reason for venting/flaring:

\_\_\_\_\_

Describe why venting or flaring is necessary. If reporting per Rule 903.b.(2), 903.c.(3).C, or 903.d.(2), include the explanation, rationale, and cause of the event:

\_\_\_\_\_

Describe how the operation will protect and minimize adverse impacts to public health, safety, welfare, the environment, and wildlife resources. If reporting per Rule 903.d.(2), include BMPs used to minimize venting on the BMP Tab:

\_\_\_\_\_

Total volume of gas vented or flared: \_\_\_\_\_ mcf  estimated  measured

Total duration of emission event: \_\_\_\_\_ hours  consecutive  cumulative

Submit a single representative gas analysis via Form 43 to create a Sample Site Facility ID# for this Location. Reference the Form 43 document number on the Related Forms tab.

Sample Site Facility ID#: \_\_\_\_\_

GAS CAPTURE PLAN

Describe the plan to connect to a gathering line or beneficially use the gas; include anticipated timeline:

\_\_\_\_\_

A Gas Capture Plan that meets the requirements of Rule 903.e is attached.

CASING PROGRAM

(No Casing Provided)

POTENTIAL FLOW AND CONFINING FORMATIONS

H2S REPORTING

Intentional release of H2S gas due to Upset Condition or malfunction.

Intent to temporarily abandon well with potential H2S concentration >100 ppm.

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:

OIL & GAS LOCATION UPDATES

OGDP ID \_\_\_\_\_ OGDP Name \_\_\_\_\_

**SITE EQUIPMENT LIST UPDATES**

Indicate the number and type of major equipment components planned for use on this Oil and Gas Location:

Wells _____	Oil Tanks _____	Condensate Tanks _____	Water Tanks _____	Buried Produced Water Vaults _____
Drilling Pits _____	Production Pits _____	Special Purpose Pits _____	Multi-Well Pits _____	Modular Large Volume Tank _____
Pump Jacks _____	Separators _____	Injection Pumps _____	Heater-Treaters _____	Gas Compressors _____
Gas or Diesel Motors _____	Electric Motors _____	Electric Generators _____	Fuel Tanks _____	LACT Unit _____
Dehydrator Units _____	Vapor Recovery Unit _____	VOC Combustor _____	Flare _____	Enclosed Combustion Devices _____
Meter/Sales Building _____	Pigging Station _____		Vapor Recovery Towers _____	

**OTHER PERMANENT EQUIPMENT UPDATES**

**OTHER TEMPORARY EQUIPMENT UPDATES**

**CULTURAL AND SAFETY SETBACK UPDATES**

**OTHER LOCATION CHANGES AND UPDATES**

Provide a description of other changes or updates to technical information for this Location:

\_\_\_\_\_

**POTENTIAL OGDG UPDATES**

**PROPOSED CHANGES TO AN APPROVED OGDG**

This Sundry Form 4 is being submitted pursuant to Rule 301.c to propose changes to an approved Oil and Gas Development Plan.

Check all boxes that pertain to the type(s) of changes being proposed for this OGDG:

- Add Oil and Gas Location(s)
- Amend Oil and Gas Location(s)
- Remove Oil and Gas Location(s)
- Oil and Gas Location attachment or plan updates
- Other
- Add Drilling and Spacing Unit(s)
- Amend Drilling and Spacing Unit(s)
- Remove Drilling and Spacing Unit(s)
- Amend the lands subject to the OGDG

Provide a detailed description of the changes being proposed for this OGDG. Attach supporting documentation such as maps if necessary.

\_\_\_\_\_

**Best Management Practices**

<b>No</b>	<b>BMP/COA Type</b>	<b>Description</b>
	Odor mitigation	Closed, upright tanks are being utilized to mitigate odor.
	Planning	Site lighting shall be shielded and directed downward and inward toward operations to avoid glare on public roads and nearby Building Units.
	Dust control	Water will be placed on dirt access roads to mitigate dust as needed.
	Noise mitigation	Noise associated with pipe handling, traffic, and other operational activity will be minimized between 7:00 pm and 7:00 am. Based off the rig sound signature, rig orientation will be considered to reduce noise levels to nearby building units and continuous monitoring will be placed at the appropriate noise points of compliance pursuant to Rule 423.a.(5).

Total: 4 comment(s)

**Operator Comments:**

The operation is planned for utilizing a workover rig and rig-assisted snubbing unit. The operation is planned for daylight only, however if washover ops begin the operation may become 24 hour operations.

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

Signed: \_\_\_\_\_ Print Name: Kelsi Welch  
 Title: Regulatory Analyst Sr Email: kelsi\_welch@oxy.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
--	--	---------------------

Total: 0 comment(s)

**Attachment List**

**Att Doc Num**

**Name**

--	--

Total Attach: 0 Files