

**State of Colorado  
Oil and Gas Conservation Commission**

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DE	ET	OE	ES
Document Number: <u>403213627</u>			
Date Received: <u>10/31/2022</u>			

**SUNDRY NOTICE**

This form is required for reports, updates, and requests as specified in the COGCC rules. It is also used to request changes to some aspects of approved permits for Wells and Oil and Gas Locations.

OGCC Operator Number: 47120 Contact Name Austin Lee  
 Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP Phone: (970) 515-1058  
 Address: 501 N DIVISION BLVD Fax: ( )  
 City: PLATTEVILLE State: CO Zip: 80651 Email: Austin\_Lee@oxy.com

**FORM 4 SUBMITTED FOR:**

Facility Type: WELL  
 API Number : 05- 123 08918 00 ID Number: 241130  
 Name: STAMM 11-25 (2-67) Number: 1  
 Location QtrQtr: NWNW Section: 25 Township: 2N Range: 67W Meridian: 6  
 County: WELD Field Name: SPINDLE

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

**Location(s)**

Location ID	Location Name and Number
318336	STAMM 11-25 (2-67)-62N67W 25NWNW

**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="940"/>	<input type="text" value="FNL"/>	<input type="text" value="850"/>	<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="NWNW"/>	Sec <input type="text" value="25"/>	Twp <input type="text" value="2N"/>	Range <input type="text" value="67W"/>	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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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"/>	Twp <input type="text"/>	Range <input type="text"/>			
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:**

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:**

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



Comments:

WSP USA (WSP) was contracted by Kerr McGee Oil & Gas Onshore LP (Kerr-McGee) to complete final reclamation inspections at plugged and abandoned (P&A) well sites located in Weld County, Colorado. The reclamation inspections were conducted in accordance with Colorado Oil and Gas Conservation Commission (COGCC) Rule 1004.

The former STAMM 11-25 #1 well (API: 05-123-08918) was P&A'd on September 11, 2008, according to Form 6 Document Number 1666580. On June 15, 2022, WSP conducted a final reclamation inspection for the former STAMM 11-25 #1 well pad (Location ID: 318336). The reclaimed well pad was seeded with a native grass seed mix. The reclaimed location is situated on non-irrigated rangeland/pasture and has been returned to that land use. A modified line-point intercept vegetation survey was conducted on the reclaimed well pad and on adjacent reference areas for comparison. Foliar and basal cover, along with non-vegetated, and noxious weed occurrences were documented. A total of 50 survey points along a 50-foot transect were recorded within the reclaimed disturbance area and 50 survey points along the two 50-foot transect were recorded within the reference area. Undesirable species, if present, were excluded from the vegetative coverage calculation. Survey results indicate the reclaimed area has a foliar vegetative cover that is 80% of the undisturbed reference area. The associated tank battery location is unknown based upon research with OXY and within the COGCC COGIS database. The inspection and vegetation survey indicate that final reclamation has been achieved in compliance with COGCC Rule 1004, which applies to the reclamation of non-crop lands. WSP personnel located the P&A wellhead location using a handheld Trimble (R1) Global Positioning System (GPS) unit and latitude and longitude coordinates obtained from the COGCC online database. A general site location map is included as Figure 1; and the Site Map displaying the location of the reclaimed site on aerial imagery is included as Figure 2. A vegetative analysis by conducting a Line Point Intercept is included as Figure 3.

Photographs of the P&A location were taken facing each cardinal direction from the P&A wellhead location. The photographic log is included within the attached document along with associated site maps.

ENGINEERING AND ENVIRONMENTAL WORK

REPORT OF TEMPORARY ABANDONMENT

Describe the method used to ensure that the Well is closed to the atmosphere and the Operator's plans for future operation of the Well in the COMMENTS box below as required by Rule 434.b.(1).

REQUEST FOR TEMPORARY ABANDONMENT EXCEEDING 6 MONTHS

State the reason for the extension request and explain the Operator's plans for future operation of the Well 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 \_\_\_\_\_

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

- Bradenhead Plan
- Change Drilling Plan
- Gross Interval Change
- Underground Injection Control
- Request approval of Reuse and Recycling Plan per Rule 905.a.(3). (Reuse and Recycling Plan must be attached.)
- Request approval of Alternative Sampling Plan per Rule 909.j.(6). for this Pit. (Alternative Sampling Program must be attached.)
- Other
- Venting or Flaring (Rule 903)
- Repair Well
- E&P Waste Management
- Beneficial Reuse of E&P Waste

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:

[Empty text box for comments]

GAS CAPTURE

VENTING AND FLARING:

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

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

Describe Other reason for venting/flaring:

[Empty text box for other reason]

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:

[Empty text box for explanation]

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:

[Empty text box for protection description]

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:

[Empty text box for gas capture plan]

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:

[Empty text box for sample point description]

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 OGDP UPDATES**

**PROPOSED CHANGES TO AN APPROVED OGDP**

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 OGDP:

- |  |  |
|--|--|
| <input type="checkbox"/> Add Oil and Gas Location(s)                     | <input type="checkbox"/> Add Drilling and Spacing Unit(s)    |
| <input type="checkbox"/> Amend Oil and Gas Location(s)                   | <input type="checkbox"/> Amend Drilling and Spacing Unit(s)  |
| <input type="checkbox"/> Remove Oil and Gas Location(s)                  | <input type="checkbox"/> Remove Drilling and Spacing Unit(s) |
| <input type="checkbox"/> Oil and Gas Location attachment or plan updates | <input type="checkbox"/> Amend the lands subject to the OGDP |
| <input type="checkbox"/> Other   |  |

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

Empty text box for detailed description of changes.

**Best Management Practices**

**No BMP/COA Type**                      **Description**

No BMP/COA Type	Description

Operator Comments:

Failed 12/29/2022 Please route to Chris Binschus Reclamation Specialist.

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

Signed: \_\_\_\_\_ Print Name: Austin Lee  
 Title: HSE Advisor Email: Austin\_Lee@oxy.com Date: 10/31/2022

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**

COA Type	Description
0 COA	

**General Comments**

User Group	Comment	Comment Date
Reclamation Specialist	Operator has not identified that all disturbed areas meet Rule 1004.d.	12/29/2022

Total: 1 comment(s)

**Attachment List**

Att Doc Num	Name
403213627	FORM 4 SUBMITTED
403213645	FINAL RECLAMATION PROCEDURE

Total Attach: 2 Files