

State of Colorado
Energy & Carbon Management Commission

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|--------------------------------------|----|----|----|
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| Date Received: | | | |

SUNDRY NOTICE

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

| | |
|--|-----------------------------------|
| ECMC Operator Number: <u>47120</u> | Contact Name <u>Drew Stormo</u> |
| Name of Operator: <u>KERR MCGEE OIL & GAS ONSHORE LP</u> | Phone: <u>(970) 336-3802</u> |
| Address: <u>501 N DIVISION BLVD</u> | Fax: () |
| City: <u>PLATTEVILLE</u> State: <u>CO</u> Zip: <u>80651</u> | Email: <u>drew_stormo@oxy.com</u> |

FORM 4 SUBMITTED FOR:

Facility Type: WELL

API Number : 05- 123 35456 00 ID Number: 428633

Name: PALYO Number: 26N-11HZ

Location QtrQtr: NWNW Section: 11 Township: 2N Range: 65W 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 |
|-------------|--------------------------|
| 428629 | PALYO 35N-W11HZ |

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)

Change of **Surface Footage From:**

Change of **Surface Footage To:**

| | | | | | |
|--------------------------------------|--------------------|---------------|---------------|------------------|-------------------|
| Current Surface Location From | QtrQtr <u>NWNW</u> | Sec <u>11</u> | Twp <u>2N</u> | Range <u>65W</u> | Meridian <u>6</u> |
| New Surface Location To | QtrQtr | Sec | Twp | Range | Meridian |

| | | | |
|------------|------------|------------|------------|
| FNL/FSL | | FEL/FWL | |
| <u>692</u> | <u>FNL</u> | <u>581</u> | <u>FWL</u> |
| | | | |

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

54 FNL

636 FWL

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

**

Current **Top of Productive Zone** Location

Sec 11

Twp 2N

Range 65W

New **Top of Productive Zone** Location

Sec

Twp

Range

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

FNL

FWL

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:**

50 FNL

460 FWL

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

**

Current **Bottomhole** Location

Sec 11

Twp 2N

Range 65W

** 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

COMMENTS:

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 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:

- 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 OGDP

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

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Operator Best Management Practices

No BMP/COA Type

Description

| | | |
|--|--|--|
| | | |
|--|--|--|

Operator Comments:

Route to area reclamation specialist. Abandoned location.

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

Signed: _____ Print Name: Drew Stormo

Title: Advisor HSE Environ Ops Email: drew_stormo@oxy.com Date: _____

Based on the information provided herein, this Sundry Notice (Form 4) complies with ECMC Rules and applicable orders and is hereby approved.

ECMC Approved: _____ Date: _____

CONDITIONS OF APPROVAL, IF ANY LIST

COA Type

Description

| | |
|--|--|
| | |
|--|--|

0 COA

General Comments

User Group

Comment

Comment Date

| | | |
|--|--|---------------------|
| | | Stamp Upon Approval |
|--|--|---------------------|

Total: 0 comment(s)

ATTACHMENT LIST

Att Doc Num

Name

| | |
|-----------|-------|
| 404294376 | OTHER |
|-----------|-------|

Total Attach: 1 Files