

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



DE	ET	OE	ES
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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: <u>47120</u>	Contact Name <u>Mike Dinkel</u>
Name of Operator: <u>KERR MCGEE OIL & GAS ONSHORE LP</u>	Phone: <u>(720) 929-6368</u>
Address: <u>P O BOX 173779</u>	Fax: <u>(720) 929-7368</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-3779</u>	Email: <u>Mike.Dinkel@anadarko.com</u>

API Number : 05- <u>123</u> <u>00</u>	OGCC Facility ID Number: <u>430972</u>
Well/Facility Name: <u>POWERS</u>	Well/Facility Number: <u>30N-27HZ</u>
Location QtrQtr: <u>SWSW</u> Section: <u>27</u> Township: <u>2N</u> Range: <u>65W</u> Meridian: <u>6</u>	
County: <u>WELD</u> Field Name: _____	
Federal, Indian or State Lease Number: _____	

Complete the Attachment
Checklist

OP OGCC

Survey Plat		
Directional Survey		
Srvc 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 SWSW Sec 27

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	
510	FSL	540	FWL
Twp <u>2N</u>	Range <u>65W</u>	Meridian <u>6</u>	
Twp _____	Range _____	Meridian _____	
			**
Twp _____	Range _____		
Twp _____	Range _____		
			**
			** attach deviated drilling plan

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 POWERS Number 30N-27HZ 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 _____

☒ REPORT OF WORK DONE Date Work Completed 02/27/2014

- | | | |
|----------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| <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 type="checkbox"/> Repair Well | <input checked="" 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:

As per Kerr-McGee Oil & Gas Onshore LP's (Kerr-McGee) approved Waste Management Plan for Land Application of Water-Based Bentonitic Drilling Fluids & Associated Drill Cuttings, the drill cuttings from the Powers 4C-27HZ, Powers 4N-27HZ, Powers 30N-27HZ, and Powers 30C-27HZ wells were land applied to the surface of the Powers 30N-27HZ well pad. The drill cuttings from the wells were mixed with EcoSponge bioremediation product and incorporated into the native soil during well pad reclamation activities. After final incorporation, a four point composite soil sample (Powers 13-27 On Pad) was collected from 0-8 inches below ground surface (bgs) from the reclaimed well pad and submitted for laboratory analysis of total petroleum hydrocarbons (TPH), benzene, toluene, ethylbenzene, and total xylenes (BTEX), pH, electrical conductivity (EC), sodium adsorption ratio (SAR), total arsenic, total barium, and arsenic by toxicity characteristic leaching procedure (TCLP). Four background soil samples (Powers 13-27 Off (OA) through Powers 13-27 Off (OD)) were collected from the undisturbed surface soil surrounding the well pad and submitted for laboratory analysis of total arsenic. The four background samples were also composited into one additional soil sample (Powers 13-27 Off Comp) and submitted for laboratory analysis of pH, EC, SAR, total arsenic, and total barium. Laboratory results confirm that all concentrations and levels in sample Powers 13-27 On Pad were within or below the Colorado Oil and Gas Conservation Commission (COGCC) allowable levels and/or below the site background levels. In addition, the TCLP arsenic concentration was below the laboratory reporting limit of 0.300 mg/L. Based on the laboratory results, Kerr-McGee is requesting a no further action (NFA) status for this well pad. The laboratory report is included as an attachment to this Form 4.

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:

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Best Management Practices

No BMP/COA Type

Description

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Operator Comments:

API Number of wells on the Powers 30N-27HZ Pad:

05-123-36362

05-123-36363

05-123-36364

05-123-36365

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

Signed: _____ Print Name: Mike Dinkel

Title: Senior HSE Representative

Email: Mike.Dinkel@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:

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)

Attachment Check List

Att Doc Num

Name

400718839

OTHER

Total Attach: 1 Files