

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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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 Cheryl Light
Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP	Phone: (720) 929-6461
Address: P O BOX 173779	Fax: (720) 929-7461
City: DENVER State: CO Zip: 80217-3779	Email: cheryl.light@anadarko.com

Complete the Attachment
Checklist

OP OGCC

API Number : 05-123 24003 00	OGCC Facility ID Number: 285595
Well/Facility Name: CAMP	Well/Facility Number: 25-31
Location QtrQtr: NWSE Section: 31 Township: 3N Range: 65W Meridian: 6	
County: WELD Field Name: WATTENBERG	
Federal, Indian or State Lease Number: _____	

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 **NWSE** Sec **31**

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	
2500	FSL	2430	FEL
Twp 3N	Range 65W	Meridian 6	
Twp	Range	Meridian	
			**
Twp	Range		
Twp	Range		
			**
			** attach deviated drilling plan

CHANGE OR ADD OBJECTIVE FORMATION AND/OR SPACING UNIT

<u>Objective Formation</u>	<u>Formation Code</u>	<u>Spacing Order Number</u>	<u>Unit Acreage</u>	<u>Unit Configuration</u>

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 CAMP Number 25-31 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 01/22/2015

☐ REPORT OF WORK DONE Date Work Completed _____

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

NO GYRO NEEDED

- 2 Call AUTOMATION REMOVAL GROUP at least 24 hr prior to rig move. Request they isolate production equipment and remove any automation prior to rig MIRU.
- 3 MIRU WL. RIH and retrieve bumper spring. RIH sinker bar and tag bottom. RDMO WL.
- 4 Prepare location for base beam equipped rig. Install perimeter fence as needed.
- 5 Check and record Bradenhead pressure. If Bradenhead valve is not accessible, re-plumb so that valve is above GL.
- 6 MIRU, kill as necessary using clean fresh water with biocide. ND WH. NU BOP. Function test and document.
- 7 MIRU EMI services. EMI while TOO H tubing string, SB (consists of 247 jts 2-3/8" J55 4.7#/ft tubing, SN, NC). LD any jts >35% wall loss/penetration. Record jt number and depth in OW production equipment failure report.
- 8 MIRU WL. PU and RIH gauge ring for 4-1/2" 11.6#/ft I80 casing to 7000'. RDMO WL.
- 9 MIRU hydrotester. PU and TIH RBP for 4-1/2" 11.6#/ft I80 casing, set at 6910' (Collars 6888' and 6932'). Roll hole using water containing biocide. PT plug to 5,000 psi for 15 min. If successful, dump 2 sx sand on RBP. RDMO hydrotester.
- 10 TOO H tubing string, SB.
- 11 ND BOP, ND TH. Remove topnut from surface casing head including packoff and plates if applicable.
- 12 Makeup handling sub for 4-1/2" casing if necessary. Unland 4-1/2" casing making sure to not exceed 129M lbs, remove slips, NU QDF on scsg head and dual entry flange.
- 13 NU BOP on annular side, function test and document. Ensure BOP has dies for 1-1/4" J55 tubing
- 14 PU and TIH 1-1/4" 2.33 #/ft J55 Integral Jt tubing to 1650'+/-. Initiate circulation using water containing biocide. Make 2 sweeps of Alcomer 74L while TIH. Ensure hoses are routed to allow returns from bradenhead.
- 15 Spot 40 BBL 10 ppg mud at 1650'
- 16 PUH to 1450'.
- 17 MIRU cementers. Spot 5bbl biocide water, 20 bbl SMS, 5 bbls biocide water, 210 SX Type III w/ 0.5% CaCl₂ mixed to 14.8ppg 1.33 cuft/sk using 3 hr pump time. Cement coverage designed for 1450' to 750'. Excess of 20% on 9" hole.
- 18 PUH to 600', circulate minimum 2x hole volume or until returns clean using water containing biocide.
- 19 TOO H, LD tubing. RDMO cementers.
- 20 ND BOP, Dual entry flange and QDF, reland casing in slips, NU starting head/top nut.
- 21 NU tubing head on 4-1/2" casing.
- 22 NU BOP, function test and document. Ensure dies are 2-3/8" dies for production tubing.
- 23 Leave well shut in overnight.
- 24 Circulate any gas from hole using water containing biocide.
- 25 MIRU WL. PU and RIH CBL/CCL/VDL to 4000', log to surface (INCLUDE TRANSIT TIME ON LOG). Before proceeding, send log and discuss (Tyler.Hindman@anadarko.com). Also send logs and invoices to rscDJVendors@anadarko.com within 24hrs of completion. RDMO WL.
- 26 PU and TIH retrieving head on 2-3/8" tubing. TIH to RBP (6,910'+/-). Circulate sand off RBP, latch onto and release
- 27 TOO H with RBP, SB tubing, LD RBP.
- 28 TIH NC, XN, 237 jts 2-3/8" 4.7#/ft J55 tubing, cleanout to PBMD if WL tag indicates fill.
- 29 Land tubing at 7734'+/-.
- 30 ND BOP, NU top flange, ensuring to use flanged master valve, XXH nipples and 5,000 psi rated casing valves. Ensure all components are rated to 5,000 psi.
- 31 RU hydrotester. Test from below tubing head, through master valve to 5,000 psi. RDMO hydrotester.
- 32 Broach tubing if time allows, notify foreman of completion. RDMO WO rig.

CASING AND CEMENTING CHANGES

Casing Type	Size	Of	/	Hole	Size	Of	/	Casing	Wt/Ft	Csg/LinTop	Setting Depth	Sacks of Cement	Cement Bottom	Cement Top

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:

Best Management Practices

No BMP/COA Type

Description

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Operator Comments:

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

Signed: _____ Print Name: Cheryl Light
Title: Sr. Regulatory Analyst Email: DJRegulatory@anadarko.com Date: 1/8/2015

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

COGCC Approved: SCHLAGENHAUF, MARK Date: 1/15/2015

CONDITIONS OF APPROVAL, IF ANY:**COA Type****Description**

	1) The additional cement referenced shall be placed as indicated and comply with Rule 317.j. The placed cement shall be verified with a CBL and documented with a Form 5 Drilling Completion Report. 2) Please submit any available gyro survey data with Form 5 Drilling Completion Report.
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General Comments**User Group****Comment****Comment Date**

#Error

Total: 0 comment(s)

Attachment Check List**Att Doc Num****Name**

400767687	FORM 4 SUBMITTED
400767696	OTHER

Total Attach: 2 Files