

State of Colorado
Oil and Gas Conservation Commission

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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: 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 30658 00 OGCC Facility ID Number: 413311
Well/Facility Name: MILLER Well/Facility Number: 40-29
Location QtrQtr: SENE Section: 29 Township: 3N Range: 66W Meridian: 6
County: WELD Field Name: WATTENBERG
Federal, Indian or State Lease Number: _____

| | | |
|---------------------|--|--|
| Survey Plat | | |
| Directional Survey | | |
| Srfc 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 SENE Sec 29

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 29

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 29 Twp 3N

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 | |
|---------------|------------------|-------------------|-----|
| 1926 | FNL | 568 | FEL |
| | | | |
| Twp <u>3N</u> | Range <u>66W</u> | Meridian <u>6</u> | |
| Twp _____ | Range _____ | Meridian _____ | |
| 2566 | FNL | 81 | FEL |
| | | | |
| Twp <u>3N</u> | Range <u>66W</u> | | |
| Twp _____ | Range _____ | | |
| 2577 | FNL | 101 | FEL |
| | | | |
| 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 MILLER Number 40-29 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 05/21/2015

☐ 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 Mangement 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:

Miller 40-29 – Bradenhead Procedure

1 Call Wattenberg IOC (970-506-5980) at least 24 hrs prior to rig move. If not already completed, request that they catch and remove plunger, isolate production equipment and remove any automation equipment prior to the rig showing up. Install perimeter fence as needed.

2 MIRU Slick line. Fish plunger if necessary and tag for PBSD (should be at 8070').

3 Prepare location for base beam rig.

4 Spot 45 jts of 1.66" 2.33# J-55 10rd IJ tbq.

5 Check wellhead for 5,000 psi rating. If wellhead is not rated to 5,000 psi, install one that is prior to completing the job.

6 MIRU WO rig. Kill well with fresh water with biocide. ND wellhead, NU BOP.

7 Run two 2" lines from starting head to return tanks.

8 PU 8-10' landing joint with TIW safety valve on top and screw into the tbq hanger. Back out the lock down pins and pull up on the tbq string to break any possible sand bridges. Do not exceed 80% of tubing tensile strength, or 57,384-lb.

9 Unseat tbq hanger and LD tbq hanger and landing joint. Install rubber wiper in stripping head.

10 MIRU EMI equipment. TOO H with 2-3/8" tbq. EMI tbq while TOO H. Lay down joints with wall loss or penetrations >35%. Replace joints as necessary. Keep yellow and blue band tubing. Note joint number and depth of tubing leak(s) on production equipment failure report in OpenWells. Clearly mark all junk (red band) tubing sent to yard.

11 PU and TIH with 2-3/8" 4.7# tbq with 4.5" RBP (4.5" 11.6# I-80). Set RBP at +/- 6500'. Spot 2 sx sand on top of RBP. TOO H. SB tbq.

12 Pressure test RBP to 1,000 psi for 15 minutes. (Pressure test to make sure plug is set correctly)

13 ND BOP, ND tubing head. Un land 4-1/2" 11.6# I-80# csg. NU double entry flange, NU BOP.

14 PU and TIH with 1.66" 2.33# J-55 10rd IJ tbq outside 4 1/2" csg to +/- 1600' with alcomer sweeps while running in.

15 Circulate 130 bbls with rig pump (Circulate at least 1.5x annular volume from 1600') or until well is dead.

16 TUH with 1.66" tbq to 1200'.

17 MIRU Cement company. Commence pumping cement job consisting 5 bbl fresh water, 20 bbl sodium meta silicate and 5 bbl fresh water; 20 bbl (90 sx) of Type III with 1/4 lb/sk cell-flake mixed at 14.8 ppg and 1.33 cuft/sk blended for a 3 hr pump time (Cement from 1200' to 890').

18 TOO H with 15 jts of 1-1/4" 2.33# to +/- 700' and circulate 2x tbq volume to clean up.

19 TOO H with remaining 1.66" 2.33# and LD.

20 Break lines and clean up with fresh water. RMDO cement company.

21 ND BOP, ND double entry flange, re-land 4-1/2" csg NU BOP.

22 Leave well shut in for minimum of 24 hours.

23 MIRU wire line and run CCL-GR-CBL-VDL from 2000' to 0' (tie into old CBL ran 5/10/2010). If Fox Hill plug is not above 890', contact engineering for further instructions. RDMO wire line.

24 Pressure test casing to 1,000 psig. If pressure test does not hold call engineering.

25 TIH with 2-3/8" tbq and retrieving head and tag sand above RBP @ +/- 6500'. Circulate sand off RBP, latch onto RBP and TOO H. SB tbq, LD RBP.

26 PU and TIH with 2-3/8" XN, and remaining 2-3/8" tbq. Land tbq @ +/- 7460'.

27 ND BOP, NU master valve.

28 Install 7 1/16" x 5,000 psi tubing head adaptor with new 5,000 psi master valve threaded 2 3/8" connection. Make sure all wellhead valves are rated to 5,000 psi.

29 Install 2 3/8" pup joint above the master valve. Pressure test the tubing head from below the tubing head through the master valve to 5,000 psi with hydro tester. NU 5k wellhead.

30 RMDO WO rig. Return well to production team.

31 Clean location and swab well back to production. Notify field foreman/field coordinator of finished work and turn well back over to production team.

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

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

Operator Comments:

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

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: _____

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

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

Total: 0 comment(s)

Attachment Check List

Att Doc Num

Name

| | |
|-----------|-------|
| 400836703 | OTHER |
|-----------|-------|

Total Attach: 1 Files