

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
Document Number: 401703880			
Date Received: 07/16/2018			

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 19890 00 OGCC Facility ID Number: 256581
Well/Facility Name: HSR-MYRNA Well/Facility Number: 15-12A
Location QtrQtr: SWSE Section: 12 Township: 1N Range: 67W 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 SWSE Sec 12

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	2130	FEL
Twp 1N	Range 67W	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 HSR-MYRNA Number 15-12A 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 07/17/2018

☐ 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:

1. Notify Automation Removal Group at least 24 hours prior to rig move. Request they catch and remove plunger, isolate production equipment, and remove any automation prior to rig MIRU.
2. MIRU slickline services. Pull bumper spring and tag bottom. Record tag depth in Open Wells.
3. Prepare location for base beam equipped rig. Install perimeter fence as needed.
4. Check and record bradenhead pressure. If bradenhead valve is not accessible, re-plumb so that valve is above GL. Blow down bradenhead and re-check pressure the next day. Repeat until pressure stays at 0 psi.
5. MIRU WO rig. Kill well as necessary using clean fresh water with biocide. ND WH. NU BOP. Unland tbg using unlanding joint and SB 1830'.
6. MIRU WL. Run gauge ring to 2550'.
7. MIRU WL. RIH with WL set (4.5", 11.6#) CIBP and set at 2500'. POOH.
8. PU and RIH with one 6' 3-1/8" perf gun with 3 spf, .50 EHD, 120o phasing. Shoot 2' at 2200' and 4' at 1800. POOH. RDMO WL.
9. TIH with (4.5", 11.6#) packer and set at 1830' to establish circulation. If circulation can be established, release packer and TOOH SB 2-3/8" tbg.
10. TIH with (4.5", 11.6#) CICR on 2-3/8" tbg and set at 1830'. Establish circulation through squeeze holes with biocide treated fresh water. Circulate a minimum of 200 bbls through squeeze holes.
11. RU cementers. Pump Aquifer Squeeze Plug: 155 sx (240 cf, 43bbl) 14 ppg with GasBlok & 1.55 cf/sk Pump 10 bbls sodium silicate followed by 140 sx. Underdisplace the remaining 2 bbls (~120 ft) on top of the retainer. Cement will cover 2200-1800' on the back side. Volume is based on 400' in 7-7/8" OH from caliper with 50% excess, 370' below retainer in 4-1/2" production casing with no excess and 120' on top of CICR in 4-1/2" casing. Slowly pull up to 1500' and reverse circulate to ensure the tbg string is clean. RDMO cementers.
12. Slowly pull out of cement SB tbg.
13. TIH with 3-1/2" rock bit on 2-3/8" tbg to prepare for drill out after fracs pass through.
14. ND BOP. NU 7-1/6", 5K flanged tubing head adaptor w/ 2-1/16" 5K flanged master valve.
15. MIRU hydrotester. Install 2 3/8" pup joint above master valve. Hydrotest wellhead to 5,000 psi from below tubing head through master valve for 15 minutes.
16. RDMO WO Rig.
17. Instruct cementing and wireline contractors to e-mail copies of all job logs/job summaries to rscDJVendors@anadarko.com within 24 hours of completion of the job.
18. Supervisor submit paper copies of all invoices, logs, and reports to Evans Engineering Specialist.

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:

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: Staff Regulatory Analyst Email: DJREGULATORY@ANADARKO.COM Date: 7/16/2018

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

COGCC Approved: McCoy, Diane Date: 7/16/2018

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

	1) Prior to starting repair work a bradenhead test shall be performed. If the beginning pressure is greater than 25 psi, or if pressure remains at the conclusion of the test, or if any liquids were present contact COGCC Engineer for sampling requirements before pumping any cement. The Form 17 shall be submitted within 10 days of the test. 2) The additional cement referenced shall be placed as indicated. The placed cement shall be verified with a CBL and documented with a Form 5.
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General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineer	Operator plans to leave cement in place during offset stimulations, will drill out after the nearby fracs are complete. This well work will meet the requirement of mitigation COA on offset well Form 2s.	07/16/2018

Total: 1 comment(s)

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401703880	SUNDRY NOTICE APPROVED-REPAIR
401703891	OTHER
401703892	WELLBORE DIAGRAM
401704122	FORM 4 SUBMITTED

Total Attach: 4 Files