

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: <u>47120</u>	Contact Name <u>CHERYL LIGHT</u>
Name of Operator: <u>KERR MCGEE OIL & GAS ONSHORE LP</u>	Phone: <u>(720) 929-6461</u>
Address: <u>P O BOX 173779</u>	Fax: <u>(720) 929-7461</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-3779</u>	Email: <u>cheryl.light@anadarko.com</u>

API Number : 05- <u>123</u> <u>19910</u> <u>00</u>	OGCC Facility ID Number: <u>256705</u>
Well/Facility Name: <u>HSR CANNON FEDERAL</u>	Well/Facility Number: <u>5-17A</u>
Location QtrQtr: <u>SWNW</u> Section: <u>17</u> Township: <u>2N</u> Range: <u>66W</u> Meridian: <u>6</u>	
County: <u>WELD</u> Field Name: <u>WATTENBERG</u>	
Federal, Indian or State Lease Number: _____	

Complete the Attachment
Checklist

OP OGCC

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 SWNW Sec 17

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	
2130	FNL	810	FWL
Twp <u>2N</u>	Range <u>66W</u>	Meridian <u>6</u>	
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 CANNON FEDERAL Number 5-17A 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 03/12/2019

☐ 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:

1. Well needs Fox Hills Squeeze from 1405'-1605' for aquifer coverage, packer, and updated valves and fittings.
2. Contact field foreman or field coordinator before rig up to isolate production equipment if possible. 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.
3. MIRU Slickline. Pull production equipment. Record tag depth in OpenWells. RD slickline. Well has Gyro from 12/18/2014.
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. Blow down bradenhead and re-check pressure the next day. Repeat until pressure stays at 0 psi.
6. MIRU WO rig. Kill well as necessary with biocide treated freshwater. ND wellhead, NU BOP. Unland tbg using unlanding joint and LD.
7. MIRU EMI services. EMI 2-3/8" tbg while TOO and tally while standing back. Lay down joints that have greater than 35% penetration or wall loss. Replace all joints that fail EMI testing. Document joint numbers and depth of bad tubing and create a Production Equipment Failure Report in OpenWells. RDMO EMI services.
8. PU bit and scraper for 4.5", 11.6# casing and run to 7610'. TOO.
9. PU and RIH with (4.5", 11.6#) RBP. Set RBP at 7780' - 61' above the top perf. Collars at 7758' and 7800'.
10. Pump biocide treated fresh water, circulate gas out, pressure test RBP and production casing to 500 psi for 15 minutes. No leakoff is acceptable. If test fails, contact Engineering. DV tool at 4952'.
11. TOO with 1 stand of tbg. Dump 2 sx sand on top of RBP. Kick on pumps at low rate to chase sand down tubing. Do not pump at high rate causing the sand to circulate. TOO and SB all 2-3/8" tubing.
12. MIRU WL and run CCL-GR-CBL-VDL from +/- 7780' to surface to confirm coverage. Contact engineer. RD WL. Forward to Engineering. In addition to normal handling, of logs/job summaries, email copies of all cement job logs/job summaries and invoices to DJVendors@anadarko.com within 24 hours of completion of the job. Confirm well has needed coverage with engineer.
13. MIRU WL. PU and RIH with two 3-1/8" perf guns with 3 spf, min 0.5" EHD, 120° phasing. Shoot 2' of squeeze holes at 1605' and 4' of squeeze holes at 1405'. RDMO WL.
14. PU and TIH with (4-1/2", 11.6#) packer on 2-3/8" tbg. Set packer at 1465'. Establish circulation.
15. Unset packer. TOO and LD packer.
16. RU hydrotesters. PU and TIH with (4-1/2", 11.6#) CIGR on 2-3/8" tbg. Hydrotest in to 5,000 psi. Set CIGR at 1465'.
17. Establish circulation to surface for a minimum 4 hours with biocide treated fresh water, and pump 100 bbls to clean up hole. Max pump pressure is 660 psi with fresh water at 2 bpm. If unable to circulate at that pressure, contact engineer.
18. RU Cementers. Pump 10 bbls (min) of pre-flush, followed by 5 bbls fresh water spacer. Pump Squeeze: 60 sx (16.6 bbl or 93 cf) Class G cement with 0.25 lb/sk polyflake, assuming 14 ppg & 1.55 cf/sk. Max pump pressure is to be 430 psi at 2 bpm with a full column of cement. Underdisplace by approximately 1 bbl. Volume is based on 140' below the CIGR inside 4-1/2", 11.6# production casing with no excess, 200' in the 4-1/2", 11.6# annulus assuming 7.88" bit size with 60% excess and 88' on top of the CIGR to cover top perfs. Collect wet and dry samples of cement to be left on rig. RD Cementers.
19. Pull out of cement at a rate of 1 jt/min. TOO to 500'. Reverse circulate to ensure no cement is left in the tbg.
20. TOO and SB all 2-3/8" tbg. LD stinger. Shut well in and WOC for a minimum of 24 hours.
21. PU and TIH with bit on 2-3/8" N-80 tubing. Drill out CIGR (1465') and cement (BOC at approximately 1605')

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:

22. MIRU WL and run CCL-GR-CBL-VDL from +/- 2000' to surface to confirm coverage. Contact engineer. Need coverage from 1405' - 1605' to continue. RD WL. Forward to Engineering. In addition to normal handling, of logs/job summaries, email copies of all cement job logs/job summaries and invoices to DJVendors@anadarko.com within 24 hours of completion of the job. Confirm well has needed coverage with engineer.

23. PU and TIH with 2-3/8" tbg. Circulate sand off RBP. Unseat and pull RBP at 7600". TOOH. LD RBP.

24. RU Hydrotesters. Hydrotest production string on the way in to 6,000 psi (80% of burst for 2 3/8" J55 tubing) below the slips. PU and TIH with 2-3/8" NC, 2-3/8" XN nipple, ~ 22 jts of 2-3/8 tbg (to get the EOT +/- 7770') with a 10,000 psi rated Packer above and below (4.5" 11.6#) on 2-3/8"tbg. Set Packer at +/- 7030' (collars at 7014' and 7052).

25. Reverse circulate casing volume at least once to load backside with biocide + fresh water and circulate any gas out of the hole. Have SDS on location. Set packer. Pressure test to 500 psi for 15 minutes. No leakoff is acceptable.

26. RU rig lubricator. Broach tubing to XN seating nipple. RD rig lubricator. ND BOP.

27. ND BOP, NU 7-1/16", 5,000 psi flanged tubing head adaptor w/ two new 2-1/16", 5,000 psi flanged master valves. Put new R46 gasket on tubing head. Install new tubing hanger ring gaskets. Install new lockdown screw packing. Ensure WH, valves, and fittings are rated to 5,000 psi. Torque and test WH.

28. If Seaboard/Weir - RU hydrotester. Install 2-3/8" pup joint above master valve. Hydrotest wellhead first to 250 psi for a low pressure test for 15 minutes. Then, hydrotest wellhead to 5,000 psi for 15 minutes. Document results. No leakoff is acceptable. RD hydrotester. If GE - pressure test void first to 250 psi for a low pressure test for 15 minutes. Then, pressure wellhead to 5,000 psi for 15 minutes. Document results. No leakoff is acceptable. Bleed off all pressure from the void when you are done.

29. Secure wellhead, clean up location. RDMO WO rig. Hang HZ Safety Prep sign on wellhead.

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: _____

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:**COA Type****Description**

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General Comments**User Group****Comment****Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)

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

401965405	OTHER
401965406	WELLBORE DIAGRAM

Total Attach: 2 Files