

FORM  
2

Rev  
12/05

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:

1714852

Plugging Bond Surety

APPLICATION FOR PERMIT TO:

1. ☒ Drill, ☐ Deepen, ☐ Re-enter, ☐ Recomplete and Operate

2. TYPE OF WELL

OIL ☐ GAS ☒ COALBED ☐ OTHER \_\_\_\_\_  
SINGLE ZONE ☒ MULTIPLE ZONE ☐ COMMINGLE ZONE ☐

Refilling ☐

Sidetrack ☐

3. Name of Operator: ENCANA OIL & GAS (USA) INC

4. COGCC Operator Number: 100185

5. Address: 370 17TH ST STE 1700

City: DENVER State: CO Zip: 80202-5632

6. Contact Name: MIRACLEPFISTER Phone: (303)623-2300 Fax: (303)623-2400

Email: \_\_\_\_\_

7. Well Name: GMU Well Number: 27-8C1 (H27NW)

8. Unit Name (if appl): GRASS MESA UNIT Unit Number: COC56608

9. Proposed Total Measured Depth: 8860

WELL LOCATION INFORMATION

10. QtrQtr: SENE Sec: 27 Twp: 6S Rng: 93W Meridian: 6

Latitude: 39.499925 Longitude: -107.755753

Footage at Surface: 1715 FNL/FSL FNL 961 FEL/FWL FEL

11. Field Name: PARACHUTE Field Number: 67350

12. Ground Elevation: 6320 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 05/11/2009 PDOP Reading: 2.4 Instrument Operator's Name: C.D. SLAUGH

15. If well is ☒ Directional ☐ Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL 2020 FNL 980 FEL 980 FEL 980 FEL 980  
Bottom Hole: FNL/FSL 2020 FNL 980 FEL 980 FEL 980  
Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_ Sec: 27 Twp: 6S Rng: 93W

16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No

17. Distance to the nearest building, public road, above ground utility or railroad: 1139

18. Distance to nearest property line: 355 19. Distance to nearest well permitted/completed in the same formation: 395

20. LEASE, SPACING AND POOLING INFORMATION

Objective Formation(s)	Formation Code	Spacing Order Number(s)	Unit Acreage Assigned to Well	Unit Configuration (N/2, SE/4, etc.)
ILES	ILES			
WILLIAMS FORK	WMFK			

21. Mineral Ownership: ☐ Fee ☐ State ☒ Federal ☐ Indian Lease #: COC54737

22. Surface Ownership: ☐ Fee ☐ State ☒ Federal ☐ Indian

23. Is the Surface Owner also the Mineral Owner? ☒ Yes ☐ No Surface Surety ID#:

23a. If 23 is Yes: Is the Surface Owner(s) signature on the lease? ☐ Yes ☐ No

23b. If 23 is No ☐ Surface Owners Agreement Attached or ☐ \$25,000 Blanket Surface Bon ☐ \$2,000 Surface Bond ☐ \$5,000 Surface Bond

24. Using standard QtrQtr, Sec, Twp, Rng format enter entire mineral lease description upon which this proposed wellsite is located (attach separate sheet/map if you prefer):  
T6S-R93W 6TH PM SEC 26: NW/4, N/2SW/4, SE/4SW/4 SEC 27: E/2NE/4, NE/4SE/4, SW/4SE/4, SEC 28: SE/4SW/4 SEC 33: NW/4, W/2SW/4 SEC 34: SE/4NE/4, E/2SE/4 SEC 35: W/2NW/4, S/2SW/4

25. Distance to Nearest Mineral Lease Line: 336 26. Total Acres in Lease: 1000

### DRILLING PLANS AND PROCEDURES

27. Is H2S anticipated? ☐ Yes ☒ No If Yes, attach contingency plan.

28. Will salt sections be encountered during drilling? ☐ Yes ☒ No

29. Will salt (>15,000 ppm TDS CL) or oil based muds be used during drilling? ☐ Yes ☒ No

30. If questions 27 or 28 are yes, is this location in a sensitive area (Rule 903)? ☐ Yes ☒ No If 28, 29, or 30 are "Yes" a pit permit may be required.

31. Mud disposal: ☒ Offsite ☐ Onsite

Method: ☐ Land Farming ☒ Land Spreading ☐ Disposal Facility Other: \_\_\_\_\_

Note: The use of an earthen pit for Recompletion fluids requires a pit permit (Rule 905b). If air/gas drilling, notify local fire officials.

Casing Type	Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bottom	Cement Top
CONDUCTOR	24	16	LINEPIPE	40	5	40	0
SURF	12+1/4	9+5/8	36	900	300	900	0
1ST	7+7/8	4+1/2	11.6	8,869	783	8,869	

32. BOP Equipment Type: ☒ Annular Preventer ☒ Double Ram ☒ Rotating Head ☐ None

33. Comments \_\_\_\_\_

34. Location ID: \_\_\_\_\_

35. Is this application in a Comprehensive Drilling Plan ? ☐ Yes ☒ No

36. Is this application part of submitted Oil and Gas Location Assessment ? ☐ Yes ☒ No

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

Signed: Y Print Name: MIRACLE PFISTER

Title: REGULATORY Date: 5/27/2009 Email: MIRACLE.PFISTER@ENCANA

Based on the information provided herein, this Application for Permit-to-Drill complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: David S. Nesline Director of COGCC Date: 9/17/2009

Permit Number: 20092589 Expiration Date: 9/16/2010

**API NUMBER**

05 045 18729 00

**CONDITIONS OF APPROVAL, IF ANY:**

### **Attachment Check List**

Att Doc Num	Name	Doc Description
1714852	APD ORIG & 1 COPY	LF@2142382 1714852
1790482	WELL LOCATION PLAT	
1790483	COPY OF TOPO MAP	
1790484	LOCATION PICTURES	LF@2142422 1790484
1790485	LOCATION PICTURES	LF@2142424 1790485
1790486	LOCATION PICTURES	LF@2142426 1790486
1790487	DEVIATED DRILLING PLAN	
1790488	FEDERAL DRILLING PERMIT	
1790489	CORRESPONDENCE	LF@2142385 1790489

Total Attach: 9 Files