

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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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

Refiling
Sidetrack

Document Number:
1758406
Plugging Bond Surety
20050043

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: NICK G.CURRAN Phone: (720)876-5288 Fax: (720)876-6288
Email: NICK.CURRAN@ENCANA.COM

7. Well Name: DINNER Well Number: 6-8-14

8. Unit Name (if appl): _____ Unit Number: _____

9. Proposed Total Measured Depth: 7915

WELL LOCATION INFORMATION

10. QtrQtr: SESE Sec: 14 Twp: 4N Rng: 66W Meridian: 6
Latitude: 40.305982 Longitude: -104.736891

Footage at Surface: 465 FNL/FSL FSL 524 FEL/FWL FEL

11. Field Name: HAMBERT Field Number: 33530

12. Ground Elevation: 4721 13. County: WELD

14. GPS Data:

Date of Measurement: 12/13/2006 PDOP Reading: 2.4 Instrument Operator's Name: DALLAS NIELSEN

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

Footage at Top of Prod Zone: FNL/FSL 51 FSL 1325 FEL 22 FEL/FWL 1328 FEL
Sec: 14 Twp: 4N Rng: 66W Sec: 14 Twp: 4N Rng: 66W

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: 231

18. Distance to nearest property line: 154 19. Distance to nearest well permitted/completed in the same formation: 916

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.)
CODELL	CODL	407-87	160	GWA
NIORARA	NBRR	407-87	160	GWA

21. Mineral Ownership: Fee State Federal Indian Lease #: _____

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):
SEE ATTACHED LEASE DESCRIPTION

25. Distance to Nearest Mineral Lease Line: 50 26. Total Acres in Lease: 210

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
SURF	12+1/4	8+5/8	24	459	235	459	0
1ST	7+7/8	4+1/2	11.6	7,879	620	3,800	7,879

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

33. Comments NO CONDUCTOR CASING WILL BE USED. WELL TWINNED WITH DINNER 8-6-14

34. Location ID: 332615

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: _____ Print Name: NICK G. CURRAN

Title: REGULATORY AGENT Date: 8/14/2009 Email: NICK.CURRAN@ENCANA.CO

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. Noshin Director of COGCC Date: 10/18/2009

API NUMBER
05 123 25319 00

Permit Number: _____ Expiration Date: 10/17/2010

CONDITIONS OF APPROVAL, IF ANY:

Attachment Check List

Att Doc Num	Name	Doc Description
1687362	OTHER	LF@2124573 1687362
1758406	APD ORIGINAL	LF@2124569 1758406
1940347	MINERAL LEASE MAP	LF@2124571 1940347
2013073	LEGAL/LEASE DESCRIPTION	LF@2124571 2013073

Total Attach: 4 Files