

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:

1692549

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 ☐
Refiling ☐Sidetrack ☒

3. Name of Operator: XTO ENERGY INC

4. COGCC Operator Number: 100264

5. Address: 382 CR 3100

City: AZTEC State: NM Zip: 87410

6. Contact Name: KELLY SMALL Phone: (505)333-3145 Fax: (505)213-0546

Email: KELLY.SMALL@XTOENERGY.COM

7. Well Name: LOPEZ CANYON SWD Well Number: 1

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

9. Proposed Total Measured Depth: 6600

WELL LOCATION INFORMATION

10. QtrQtr: NWSE Sec: 21 Twp: 33S Rng: 67W Meridian: 6

Latitude: 37.154592 Longitude: -104.889849

 Footage at Surface: 1415 FNL/FSL 1817 FEL/FWL
 FSL FEL

11. Field Name: PURGATOIRE RIVER Field Number: 70830

12. Ground Elevation: 7232 13. County: LAS ANIMAS

14. GPS Data:

Date of Measurement: 10/05/2005 PDOP Reading: 6.0 Instrument Operator's Name: GARY L. TERRY

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

Footage at Top of Prod Zone: FNL/FSL FEL/FWL Bottom Hole: FNL/FSL FEL/FWL

Sec: Twp: Rng: Sec: Twp: Rng:

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: 3500

18. Distance to nearest property line: 1225 19. Distance to nearest well permitted/completed in the same formation:

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.)
DAKOTA-PURGATOIRE	DK-PR			
ENTRADA-DOCKUM	EN-DK			

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.

25. Distance to Nearest Mineral Lease Line: 1225 26. Total Acres in Lease: 1724

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: PIT

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	20		84	10	84	0
SURF	17+1/2	13+3/8	48	972	363	972	0
1ST	12+1/4	8+5/8	32	4,200	1,033	4,200	0
2ND	7+7/8	5+1/2	17	6,600	584	6,600	0

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

33. Comments SIDETRACK FOR API #05-071-09733

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: _____ Print Name: KELLY SMALL

Title: REGULATORY Date: _____ Email: KELLY.SMALL@XTOENERGY

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: _____ Director of COGCC Date: _____

Permit Number: _____ Expiration Date: _____

API NUMBER

05 071 09733 00

CONDITIONS OF APPROVAL, IF ANY:**Attachment Check List**

Att Doc Num	Name	Doc Description
1692549	APD ORIGINAL	LF@2164223 1692549

Total Attach: 1 Files