

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:

1692979

Plugging Bond Surety

20010124

3. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP 4. COGCC Operator Number: 471205. Address: P O BOX 173779City: DENVER State: CO Zip: 80217-37796. Contact Name: CHERYL LIGHT Phone: (720)929-6461 Fax: (720)929-7461Email: CHERYL.LIGHT@ANADARKO.COM7. Well Name: WARDELL Well Number: 22-29

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

9. Proposed Total Measured Depth: 7940

WELL LOCATION INFORMATION

10. QtrQtr: SWNW Sec: 29 Twp: 3N Rng: 65W Meridian: 6Latitude: 40.198610 Longitude: -104.693920
Footage at Surface: 1849 FNL/FSL FNL 794 FEL/FWL FWL
11. Field Name: WATTENBERG Field Number: 9075012. Ground Elevation: 4902 13. County: WELD

14. GPS Data:

Date of Measurement: 03/25/2009 PDOP Reading: 2.1 Instrument Operator's Name: CODY MATTSON15. If well is ☒ Directional ☐ Horizontal (highly deviated) **submit deviated drilling plan.**
Footage at Top of Prod Zone: FNL/FSL 2615 FNL 1320 FWL 2615 FNL 1320 FWL
Bottom Hole: FNL/FSL 2615 FNL 1320 FWL 2615 FNL 1320 FWL
Sec: _____ Twp: _____ Rng: _____ Sec: 29 Twp: 3N Rng: 65W
16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 79418. Distance to nearest property line: 794 19. Distance to nearest well permitted/completed in the same formation: 781

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.)
J SAND	JSND		160	S2NW/N2SW

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 OGL DATED 7/30/1970

25. Distance to Nearest Mineral Lease Line: _____ 1316 _____ 26. Total Acres in Lease: _____ 5720 _____

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	776	357	776	16
1ST	7+7/8	4+1/2	11.6	7,970	670	7,970	3,549

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

33. Comments _____

34. Location ID: _____ 336193 _____

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: _____ CHERYL LIGHT

Title: _____ SR REG ANALYST _____ Date: _____ Email: _____ CHERYL.LIGHT@ANADARKO. _____

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: _____

API NUMBER

05 123 25847 00

Permit Number: _____ Expiration Date: _____

CONDITIONS OF APPROVAL, IF ANY: _____

Attachment Check List

Att Doc Num	Name	Doc Description
1692979	APD ORIGINAL	LF@2171092 1692979
1692982	30 DAY NOTICE LETTER	LF@2171093 1692982
1692983	SURFACE AGRMT/SURETY	LF@2171094 1692983
1692984	OIL & GAS LEASE	LF@2171095 1692984

Total Attach: 4 Files