

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:

400013036

Plugging Bond Surety

20040083

3. Name of Operator: PIONEER NATURAL RESOURCES USA INC 4. COGCC Operator Number: 100845. Address: 1401 17TH ST STE 1200City: DENVER State: CO Zip: 802026. Contact Name: Georgina Kovacik Phone: (303)675-2611 Fax: (303)294-1251Email: georgina.kovacik@pxd.com7. Well Name: Sundance Well Number: 24-28 Tr8. Unit Name (if appl): Cottontail Pass Unit Number: COC59968A9. Proposed Total Measured Depth: 1855

## WELL LOCATION INFORMATION

10. QtrQtr: SESW Sec: 28 Twp: 32S Rng: 66W Meridian: 6Latitude: 37.223200 Longitude: -104.788500Footage at Surface: 391 FNL/FSL FSL 1538 FEL/FWL FWL11. Field Name: Purgatoire River Field Number: 7083012. Ground Elevation: 7418 13. County: LAS ANIMAS

## 14. GPS Data:

Date of Measurement: 09/29/2009 PDOP Reading: 3.2 Instrument Operator's Name: R. Coberly15. 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  No17. Distance to the nearest building, public road, above ground utility or railroad: 1525 ft18. Distance to nearest property line: 204 ft 19. Distance to nearest well permitted/completed in the same formation: 3855 ft

## 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.)
Raton	RTON	NA		NA

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#: 20040084

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: 204 ft 26. Total Acres in Lease: 2486

### 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: Drilling 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	12+3/4	12+3/4	33.38	6			
SURF	11	8+5/8	24	852	179	852	0
S.C. 1.1	7+7/8	5+1/2	15.5	1,855	275	1,855	0

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

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

34. Location ID: 309387

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: Georgina Kovacic

Title: Engineering Tech Date: 11/3/2009 Email: georgina.kovacic@pxd.com

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: \_\_\_\_\_

<b>API NUMBER</b>	Permit Number: _____	Expiration Date: _____
05	<b>CONDITIONS OF APPROVAL, IF ANY:</b>	

All representations, stipulations and conditions of approval stated in the Form 2A for this location shall constitute representations, stipulations and conditions of approval for this Form 2 Permit-to-Drill and are enforceable to the same extent as all other representations, stipulations and conditions of approval stated in this Permit-to-Drill.

### **Attachment Check List**

Att Doc Num	Name	Doc Description
400013062	WELL LOCATION PLAT	WellPlat_Sundance_24-28_TR.pdf
400013063	LEGAL/LEASE DESCRIPTION	LeaseDesc_Sundance_TR.pdf
400013064	TOPO MAP	Topo_Sundance_24-28_TR.pdf
400013065	30 DAY NOTICE LETTER	NOS_Sundance_Tr.pdf
400013066	CONST. LAYOUT DRAWINGS	Layout_Sundance_24-28_TR.pdf

Total Attach: 5 Files