

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:

1790698

Plugging Bond Surety

20040060

3. Name of Operator: BARRETT CORPORATION* BILL4. COGCC Operator Number: 100715. Address: 1099 18TH ST STE 2300City: DENVER State: CO Zip: 802026. Contact Name: MATT BARBER Phone: (303)312-8168 Fax: (303)291-0420Email: MBARBER@BILLBARRETTCORP.COM7. Well Name: JOLLEY Well Number: 21D-20-691

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

9. Proposed Total Measured Depth: 7669

WELL LOCATION INFORMATION

10. QtrQtr: NENW Sec: 20 Twp: 6S Rng: 91W Meridian: 6Latitude: 39.517449 Longitude: -107.582689
 Footage at Surface: 1100 FNL 1405 FWL
 FNL/FSL FEL/FWL
11. Field Name: MAMM CREEK Field Number: 5250012. Ground Elevation: 6320.5 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 08/27/2009 PDOP Reading: 1.9 Instrument Operator's Name: D. SLAUGH15. 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
219 FNL 1962 FWL 205 FNL 1990 FWL
 Sec: 20 Twp: 6S Rng: 91W Sec: 20 Twp: 6S Rng: 91W
16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 1938 ft18. Distance to nearest property line: 74 ft 19. Distance to nearest well permitted/completed in the same formation: 326 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.)
ILES	ILES	191-10	320	N2
WILLIAMS FORK	WMFK	191-8	320	N2

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):
N2NE, SENE, NENW, E2SW, SEC.20; W2W2SW, SEC.21, T6S,R91W.

25. Distance to Nearest Mineral Lease Line: 205 ft 26. Total Acres in Lease: 280

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: EVAPORATION & BACKFIL

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	26	16	42	40		40	0
SURF	12+1/4	9+5/8	36	800	250	800	0
1ST	8+3/4	4+1/2	11.6	7,669	610	7,669	500

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

33. Comments THERE ARE NO VISIBLE IMPROVMENTS WITHIN 400' OF THIS LOCATION. THIS IS LOCATED WITHIN AN AREA COVERED BY COMMUNITIZATION AGREEMENT # COC 07083. RULE 305/306 CONSULTATIONS WAIVED, SEE MEMORANDUM OF SUA. JOLLEY FED (MDP 12) LOCATION ASSESSMENT FORM 2A SUBMITTED TO COGCC ON 9/15/2009.

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: MATT BARBER

Title: PERMIT ANALYST Date: 10/6/2009 Email: MBARBER@BILLBARRETTCO

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

CONDITIONS OF APPROVAL, IF ANY:

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
1790698	APD ORIG & 1 COPY	LF@2157341 1790698
1790699	WELL LOCATION PLAT	LF@2157342 1790699
1790700	ACCESS ROAD MAP	LF@2157315 1790700
1790701	MINERAL LEASE MAP	LF@2157344 1790701
1790702	SURFACE AGRMT/SURETY	LF@2157345 1790702
1790703	DEVIATED DRILLING PLAN	LF@2157346 1790703
2097557	MULTI-WELL PLAN	LF@2157343 2097557
400017119	SURFACE AGRMT/SURETY	Jolley Federal Pad - Sec 20 T6S-R91W Revised SUA.pdf

Total Attach: 8 Files