

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:

400016304

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: 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: DeAnne Spector Phone: (720)876-5826 Fax: (720)876-6060
Email: deanne.spector@encana.com

7. Well Name: Federal Well Number: 25-2BB (PH25)

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

9. Proposed Total Measured Depth: 7222

WELL LOCATION INFORMATION

10. QtrQtr: SENE Sec: 25 Twp: 7S Rng: 96W Meridian: 6
Latitude: 39.410440 Longitude: -108.050970

Footage at Surface: 1956 FNL/FSL FNL 644 FEL/FWL FEL

11. Field Name: Parachute Field Number: 67350

12. Ground Elevation: 6064 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 01/14/2009 PDOP Reading: -1.0 Instrument Operator's Name: Ted Taggart

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

Footage at Top of Prod Zone: FNL/FSL 250 FNL 1980 FEL 250 FEL 1980 FEL
Bottom Hole: FNL/FSL 250 FNL 1980 FEL
Sec: 25 Twp: 7S Rng: 96W Sec: 25 Twp: 7S Rng: 96W

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: 1330 mi

18. Distance to nearest property line: 250 ft 19. Distance to nearest well permitted/completed in the same formation: 668 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	139-46	20	N/2
Williams Fork	WMSFK	139-44	20	N/2

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#: 2009

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):
 Sec. 25 T7S-R96W N/2

25. Distance to Nearest Mineral Lease Line: 250 ft 26. Total Acres in Lease: 320

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
CONDUCTOR	24+0/0	16+0/0	65	40	5	40	0
SURF	12+1/4	8+5/8	24	1,100	2,067	1,100	0
1ST	7+7/8	4+1/2	11.6	7,222	658	7,222	3,706

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

33. Comments The Federal 25-2BB is part of the S. Parachute GAP Master APD. Please refer to this document for drilling information. A one page site specific drill plan is included in the attachments.

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: DeAnne Spector

Title: Regulatory Analyst Date: _____ Email: deanne.spector@encana.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: _____

API NUMBER	Permit Number: _____	Expiration Date: _____
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
400016422	DEVIATED DRILLING PLAN	Encana Federal 25-2BB Rev-A.0 Plan 10.16.09.pdf
400016423	DRILLING PLAN	1 pg drill plan.pdf
400018048	PLAT	Survey Plat 25-2BB.pdf
400018049	CONST. LAYOUT DRAWINGS	Survey Construction 25-2BB.pdf
400018052	TOPO MAP	Survey Topo 25-2BB.pdf
400018053	ACCESS ROAD MAP	Access Road 25-2BB.pdf
400018054	FED. DRILLING PERMIT	WIS_PRINT_SUBMITTED_77911.pdf
400018055	LOCATION PHOTO	Survey Pictures 25-2BB.pdf

Total Attach: 8 Files