

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



DE ET OE ES

Document Number:
400016762
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: 25-9 (PH25)

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

9. Proposed Total Measured Depth: 6858

WELL LOCATION INFORMATION

10. QtrQtr: SENE Sec: 25 Twp: 7S Rng: 96W Meridian: 6

Latitude: 39.410440 Longitude: -108.050780

Footage at Surface: 1958 FNL/FSL FNL 591 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 2150 FSL 660 FEL/FWL FEL Bottom Hole: FNL/FSL 2150 FSL 660 FEL/FWL 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 ft

18. Distance to nearest property line: 660 ft 19. Distance to nearest well permitted/completed in the same formation: 626 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/2S/2
Williams Fork	WMFK	139-44	20	N/2S/2

21. Mineral Ownership: Fee State Federal Indian Lease #: COC27825

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):
 SENE Sec. 25 T7S-R96W N/2

25. Distance to Nearest Mineral Lease Line: 660 26. Total Acres in Lease: 160

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	467	1,100	0
1ST	7+7/8	4+1/2	11.6	6,858	659	6,858	3,398

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

33. Comments The Federal 25-9 (PH25) is included in the S. Parachute GAP Master APD. Please refer to this document for drilling plans. A one page, site specific drill plan is included with 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
400016817	DEVIATED DRILLING PLAN	Encana Federal 25-9 Rev-A.0 Plan 10.16.09.pdf
400016818	DRILLING PLAN	1 Pg drill plan.pdf
400018117	PLAT	Plat 25-9.pdf
400018121	OTHER	Addendum 25-9.pdf
400018122	CONST. LAYOUT DRAWINGS	Construction 25-9.pdf
400018123	TOPO MAP	Topo 25-9.pdf
400018124	ACCESS ROAD MAP	Access Roads 25-9.pdf
400018126	LOCATION PICTURES	Photos 25-9.pdf

Total Attach: 8 Files