

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:

2585368

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: BP AMERICA PRODUCTION COMPANY

4. COGCC Operator Number: 10000

5. Address: 501 WESTLAKE PARK BLVD

City: HOUSTON State: TX Zip: 77079

6. Contact Name: DEBRA BEMENDERFER Phone: (970)375-6813 Fax: (970)382-6696

Email: DEB.BEMENDERFER@CH2M.COM

7. Well Name: SOUTHERN UTE TRIBAL FF Well Number: 4

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

9. Proposed Total Measured Depth: 3483

WELL LOCATION INFORMATION

10. QtrQtr: NWSW Sec: 31 Twp: 34N Rng: 8W Meridian: M

Latitude: 37.146420 Longitude: -107.764010

	FNL/FSL		FEL/FWL
Footage at Surface:	2272 FSL	1277	FWL

11. Field Name: IGNACIO BLANCO Field Number: 38300

12. Ground Elevation: 6446.4 13. County: LA PLATA

14. GPS Data:

Date of Measurement: 11/01/2007 PDOP Reading: 2.1 Instrument Operator's Name: ROBERT HINOJOSA

15. 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
1827	FSL	2499	FWL	1810	FSL
				2548	FWL
Sec: 31	Twp: 34N	Rng: 8W	Sec: 31	Twp: 34N	Rng: 8W

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: 1359 ft

18. Distance to nearest property line: 342 ft 19. Distance to nearest well permitted/completed in the same formation: 898 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.)
FRUITLAND COAL	FRLDC	112-180	320	S/2

21. Mineral Ownership: ☐ Fee ☐ State ☐ Federal ☒ Indian Lease #: 750-88-1004

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):

PLEASE SEE ATTACHED MINERAL LEASE

25. Distance to Nearest Mineral Lease Line: 2109 ft 26. Total Acres in Lease: 1800

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: RECYCLE-REUSE

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	373	278	373	0
1ST	7+7/8	5+1/2	15.5	3,483	447	3,483	0

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

33. Comments NO CONDUCTOR CASING WILL BE REQUIRED. NO CHANGES HAVE BEEN MADE SINCE THE ORIGINAL FILING.

34. Location ID: 413430

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: DEBRA BEMENDERFER

Title: PERMITTING Date: _____ Email: DEB.BEMENDERFER@CH2M.

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

05 067 09722 00

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
2585368	APD ORIGINAL	LF@2204611 2585368

Total Attach: 1 Files