

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:

2585625

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: 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: GGU FEDERAL Well Number: 33D-28-6918. Unit Name (if appl): GIBSON GULCH U Unit Number: COC052447
X9. Proposed Total Measured Depth: 8047

WELL LOCATION INFORMATION

10. QtrQtr: SENW Sec: 28 Twp: 6S Rng: 91W Meridian: 6Latitude: 39.500851 Longitude: -107.561836
 Footage at Surface: 1982 FNL/FSL FNL 1881 FEL/FWL FWL
11. Field Name: MAMM CREEK Field Number: 5250012. Ground Elevation: 6337.6 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 09/06/2009 PDOP Reading: 4.1 Instrument Operator's Name: D. SLAUGH (TRI STATE LAND SURVEY)15. If well is ☒ Directional ☐ Horizontal (highly deviated) **submit deviated drilling plan.**
 Footage at Top of Prod Zone: FNL/FSL 2471 FSL 1990 FEL 2471 FEL 1990
 Bottom Hole: FNL/FSL 2471 FSL 1990 FEL 2471 FEL 1990
 Sec: 28 Twp: 6S Rng: 91W Sec: 28 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: 1794 ft18. Distance to nearest property line: 777 ft 19. Distance to nearest well permitted/completed in the same formation: 329 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	191-65		
WILLIAMS FORK	WMFK	191-9		

21. Mineral Ownership: ☐ Fee ☐ State ☒ Federal ☐ Indian Lease #: COC41048

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):
W/2, SE/4, S/2NE/4, NW/4NE/4

25. Distance to Nearest Mineral Lease Line: 1990 ft 26. Total Acres in Lease: 600

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	8,047	540	8,047	

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

33. Comments THERE ARE NO VISIBLE IMPROVEMENTS WITHIN 400'. THIS WELL IS LOCATED AT THE PENDING GGU FED (MDP PAD#9) 22B-28-691 FORM 2A (DOC ID: 1774645). THE WELL IS APPROVED UNDER AN ENVIRONMENTAL ASSESSMENT THROUGH THE BLM GLENWOOD SPRINGS CO. OFFICE.

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: PERMITTING Date: _____ 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
2585625	APD ORIGINAL	LF @2209546 2585625
2585626	WELL LOCATION PLAT	LF @2209547 2585626
2585627	MULTI-WELL PLAN	LF @2209548 2585627
2585628	LOCATION DRAWING	LF @2209549 2585628
2585629	ACCESS ROAD MAP	LF @2209550 2585629
2585630	LEASE MAP	LF @2209551 2585630
2585631	DRILLING PLAN	LF @2209552 2585631
2585632	DEVIATED DRILLING PLAN	LF @2209553 2585632
2585633	FED. DRILLING PERMIT	LF @2209554 2585633

Total Attach: 9 Files