

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:

400028258

Plugging Bond Surety

20040105

3. Name of Operator: BERRY PETROLEUM COMPANY 4. COGCC Operator Number: 100915. Address: 1999 BROADWAY STE 3700City: DENVER State: CO Zip: 802026. Contact Name: JANNI KEIDEL Phone: (303)999-4225 Fax: (303)999-4325Email: jek@bry.com7. Well Name: CHEVRON Well Number: 35-14D

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

9. Proposed Total Measured Depth: 10609

WELL LOCATION INFORMATION

10. QtrQtr: NWSW Sec: 35 Twp: 5S Rng: 96W Meridian: 6Latitude: 39.568645 Longitude: -108.144048
 Footage at Surface: 1544 FNL/FSL FSL 560 FEL/FWL FWL
11. Field Name: GRAND VALLEY Field Number: 3129012. Ground Elevation: 8088 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 06/12/2006 PDOP Reading: 3.7 Instrument Operator's Name: ROBERT WOOD15. 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 _____

1820 FSL 660 FWL 1820 FSL 660 FWLSec: 35 Twp: 5S Rng: 96W Sec: 35 Twp: 5S Rng: 96W16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 25386 ft18. Distance to nearest property line: 1131 ft 19. Distance to nearest well permitted/completed in the same formation: 321 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.)
Williams Fork	WMFK	510-18	320	S/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#: 20040106

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 LEASE MAP ATTACHED TO ORIGINAL APD (LEASE #2)

25. Distance to Nearest Mineral Lease Line: 833 ft 26. Total Acres in Lease: 4622

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	30	20	55	90	100	90	0
SURF	16	9+5/8	36	2,000	1,000	2,000	0
3RD	8+3/4	4+1/2	11.6	10,609	600	10,609	200

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

33. Comments I CERTIFY THAT THERE HAS BEEN NO CHANGES IN LAND USE, LEASE DESCRIPTION. PAD HAS BEEN BUILT. NO RIG ON SITE.

34. Location ID: 335912

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: JANNI KEIDEL

Title: PERMITTING AGENT Date: _____ Email: jek@bry.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 05 045 15219 00	Permit Number: _____	Expiration Date: _____
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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
400028922	APD ORIG & 1 COPY	Form 2 (L35 596) Chevron 35-14D.pdf
400029465	30 DAY NOTICE LETTER	30 Day Notice Letter for L35 596 Permits.pdf

Total Attach: 2 Files