

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:

400029899

Plugging Bond Surety

20040060

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* BILL 4. COGCC Operator Number: 10071

5. Address: 1099 18TH ST STE 2300
City: DENVER State: CO Zip: 80202

6. Contact Name: Matt Barber Phone: (303)312-8168 Fax: (303)291-0420
Email: mbarber@billbarrettcorp.com

7. Well Name: Werner Well Number: 34B-23-692

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

9. Proposed Total Measured Depth: 8331

WELL LOCATION INFORMATION

10. QtrQtr: SWSE Sec: 23 Twp: 6S Rng: 92W Meridian: 6

Latitude: 39.507639 Longitude: -107.630254

Footage at Surface: 809 FNL/FSL FSL 1536 FEL/FWL FEL

11. Field Name: Mamm Creek Field Number: 52500

12. Ground Elevation: 5947 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 10/08/2009 PDOP Reading: 6.0 Instrument Operator's Name: James A Kalmon

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

Footage at Top of Prod Zone: FNL/FSL 469 FSL 1996 FEL/FWL FEL Bottom Hole: FNL/FSL 469 FSL 1996 FEL/FWL FEL
Sec: 23 Twp: 6S Rng: 92W Sec: 23 Twp: 6S Rng: 92W

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: 545 ft

18. Distance to nearest property line: 210 ft 19. Distance to nearest well permitted/completed in the same formation: 326 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	191-10	320	S/2
Williams Fork	WMFK	191-8	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#: _____

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):
See attached Lease Boundary Map

25. Distance to Nearest Mineral Lease Line: 836 ft 26. Total Acres in Lease: 2200

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 & Backfilling

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	840	260	840	0
1ST	8+3/4	4+1/2	11.6	8,331	610	8,331	

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

33. Comments See addendum for visible improvements within 400' of this location.
This well is located at the pending Werner 44C-23-692 Form 2A.
BBC is the surface owner.
Casing comments: production string second hole size = 7 7/8, production cement top = 500' above top of gas

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: Permit Analyst Date: _____ Email: mbarber@billbarrettcorp.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: _____
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
400030856	DEVIATED DRILLING PLAN	Directional Drilling.pdf
400030858	LOCATION DRAWING	Location.pdf
400030860	WELL LOCATION PLAT	Plat.pdf
400030861	DRILLING PLAN	WBD.pdf
400030863	ACCESS ROAD MAP	Access.pdf
400030866	LEASE MAP	Lease.pdf

Total Attach: 6 Files