

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:

2094078

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: EXXON MOBIL CORPORATION4. COGCC Operator Number: 286005. Address: P O BOX 4358City: HOUSTON State: TX Zip: 77210-43586. Contact Name: MARK DEL PICO Phone: (281)654-1926 Fax: (281)654-1940Email: MARK.DELPICO@EXXONMOBIL.COM7. Well Name: FREEDOM UNIT Well Number: 197-21A98. Unit Name (if appl): FREEDOM UNIT Unit Number: COC069547  
X9. Proposed Total Measured Depth: 13350

## WELL LOCATION INFORMATION

10. QtrQtr: NWNE Sec: 21 Twp: 1S Rng: 97W Meridian: 6Latitude: 39.954970 Longitude: -108.283244
 Footage at Surface: 838 FNL/FSL FNL 1492 FEL/FWL FEL
11. Field Name: PICEANCE CREEK Field Number: 6880012. Ground Elevation: 6064 13. County: RIO BLANCO

## 14. GPS Data:

Date of Measurement: 11/22/2006 PDOP Reading: 2.7 Instrument Operator's Name: D. PETTY15. If well is ☒ Directional ☐ Horizontal (highly deviated) **submit deviated drilling plan.**
 Footage at Top of Prod Zone: FNL/FSL 1080 FNL 1142 FEL/FWL FEL Bottom Hole: FNL/FSL 1080 FNL 1142 FEL/FWL FEL  
 Sec: 22 Twp: 1S Rng: 97W Sec: 22 Twp: 1S Rng: 97W
16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 1000 ft18. Distance to nearest property line: 190 ft 19. Distance to nearest well permitted/completed in the same formation: 936 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.)
MESAVERDE	MVRD			
OHIO CREEK	OHCRK			
WASATCH	WSTC			

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 MAP AND MINERAL LEASE DESCRIPTION.

25. Distance to Nearest Mineral Lease Line: 259 ft 26. Total Acres in Lease: 400

### 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: BURIAL

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+1/3	16+4/3	LINEPIPE	120	280	120	0
SURF	14+3/4	10+3/4	45.5	3,850	2,130	3,800	0
1ST	9+7/8	7	23	9,200	1,580	9,200	3,300
2ND	6+1/8	4+1/2	15.1	13,350	660	13,350	6,650

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

33. Comments SEE ATTACHED FEDERAL APPLICATION FOR ADDITIONAL DETAILS AND SEE ATTACHMENT FOR COMMENTS ON ITEMS 29 & 30, AND CASING CEMENTING PROGRAM AND REQUEST FOR EXCEPTION OF RULE 317.

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: MARK DEL PICO

Title: REGULATORY Date: \_\_\_\_\_ Email: MARK.DELPICO@EXXONMO

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
2094078	APD ORIGINAL	LF@2217583 2094078
2094079	WELL LOCATION PLAT	LF@2217584 2094079
2094080	TOPO MAP	LF@2217647 2094080
2094081	TOPO MAP	LF@2217648 2094081
2094082	MINERAL LEASE MAP	LF@2217587 2094082
2094083	DEVIATED DRILLING PLAN	LF@2217588 2094083
2094084	FED. DRILLING PERMIT	LF@2217589 2094084
2094784	SURFACE PLAN	LF@2217590 2094784
2094785	PROPOSED BMPs	LF@2217765 2094785
2094786	DRILLING PLAN	LF@2217591 2094786

Total Attach: 10 Files