

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:

2095077

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 CORPORATION

4. COGCC Operator Number: 28600

5. Address: P O BOX 4358

City: HOUSTON State: TX Zip: 77210-4358

6. Contact Name: MARK DEL PICO Phone: (281)654-1926 Fax: (281)654-1940
Email: MARK.DELPICO@EXXONMOBIL.COM

7. Well Name: FREEDOM UNIT Well Number: 297-20A1

8. Unit Name (if appl): FREEDOM UNIT Unit Number: COC69547X

9. Proposed Total Measured Depth: 12

WELL LOCATION INFORMATION

10. QtrQtr: SENE Sec: 20 Twp: 2S Rng: 97W Meridian: 6

Latitude: 39.862867 Longitude: -108.298900

Footage at Surface: 2324 FNL/FSL FNL 686 FEL/FWL FEL

11. Field Name: PICEANCE CREEK Field Number: 68800

12. Ground Elevation: 6211 13. County: RIO BLANCO

14. GPS Data:

Date of Measurement: 08/24/2005 PDOP Reading: 2.2 Instrument Operator's Name: J.W./C.W./C.G.

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

Footage at Top of Prod Zone: FNL/FSL 1337 FSL 547 FEL 547 FEL 547 FEL 547
Bottom Hole: FNL/FSL 1337 FSL 547 FEL 547 FEL 547
Sec: 20 Twp: 2S Rng: 97W Sec: 20 Twp: 2S Rng: 97W

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: 594 ft

18. Distance to nearest property line: 337 ft 19. Distance to nearest well permitted/completed in the same formation: 4100 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 #: COC60724

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 Bond ☐ \$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: 768 ft 26. Total Acres in Lease: 1440

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	20	16	LINEPIPE	120	100	120	0
SURF	14+3/4	10+3/4	45.5	3,600	2,010	3,600	0
1ST	9+7/8	7	26	8,000	1,310	8,000	3,100
2ND	6+1/8	4+1/2	15.1	12	620	12	5

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

33. Comments APD EXPIRES ON 04/19/2010. THE PAD IS BUILT & A2 & A3 HAVE BEEN SPUD. NO CHANGES TO APPROVED APD. SINCE THE PAD IS BUILT, THERE IS NO REQUIREMENT FOR A FORM 2A.

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: 1/28/2010 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: _____

API NUMBER

05 103 11255 00

Permit Number: _____ Expiration Date: _____

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
2095077	APD ORIGINAL	LF@2219114 2095077
400038465	FORM 2 SUBMITTED	400038465.pdf

Total Attach: 2 Files