

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:

2095995

Plugging Bond Surety

20010124

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: KERR-MCGEE OIL & GAS ONSHORE LP 4. COGCC Operator Number: 47120

5. Address: P O BOX 173779

City: DENVER State: CO Zip: 80217-3779

6. Contact Name: CHERYL LIGHT Phone: (720)929-6461 Fax: (720)929-7461

Email: CHERYL.LIGHT@ANADARKO.COM

7. Well Name: IONE LAND & CATTLE UNIT Well Number: 1

8. Unit Name (if appl): \_\_\_\_\_ Unit Number: \_\_\_\_\_

9. Proposed Total Measured Depth: 7950

WELL LOCATION INFORMATION

10. QtrQtr: SWSW Sec: 8 Twp: 2N Rng: 66W Meridian: 6

Latitude: 40.148039 Longitude: -104.804022

Footage at Surface: \_\_\_\_\_ FNL/FSL \_\_\_\_\_ FEL/FWL \_\_\_\_\_  
990 FSL 990 FWL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 4857 13. County: WELD

14. GPS Data:

Date of Measurement: 07/16/2008 PDOP Reading: 3.7 Instrument Operator's Name: CODY MATTSON

15. 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 \_\_\_\_\_

Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_ Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_

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: 588 ft

18. Distance to nearest property line: 1007 ft 19. Distance to nearest well permitted/completed in the same formation: 1808 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.)
NIOBRARA	NBRR	407-66	160	SW/4

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):  
 SW/4, NW/4, SECTION 8: TOWNSHIP 2 NORTH, RANGE 66 WEST

25. Distance to Nearest Mineral Lease Line: 1007 ft 26. Total Acres in Lease: 320

### 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
SURF	12+1/4	8+5/8	24	213	200	213	10
1ST	7+7/8	4+1/2	11.6	7,950	500	7,950	4,744
			Stage Tool	4,108	500	4,108	340

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

33. Comments \_\_\_\_\_

34. Location ID: 318018

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: CHERYL LIGHT

Title: SENIOR REGULATORY ANALYST Date: 2/11/2010 Email: CHERYL.LIGHT@ANADARKO.

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: \_\_\_\_\_

<b>API NUMBER</b> 05 123 08207 00	Permit Number: _____ Expiration Date: _____
<b>CONDITIONS OF APPROVAL, IF ANY:</b> _____	

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
2095995	APD ORIGINAL	LF@2418665 2095995
2095996	30 DAY NOTICE LETTER	LF@2418667 2095996
2095997	SURFACE AGRMT/SURETY	LF@2418666 2095997

Total Attach: 3 Files