

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:
400039809
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: ENCANA OIL & GAS (USA) INC 4. COGCC Operator Number: 100185

5. Address: 370 17TH ST STE 1700
City: DENVER State: CO Zip: 80202-5632

6. Contact Name: DeAnne Spector Phone: (720)876-5826 Fax: (720)876-6060
Email: deanne.spector@encana.com

7. Well Name: Satterfield Well Number: 10-3D (C10OU)

8. Unit Name (if appl): Orchard Unit Unit Number: COC66496X

9. Proposed Total Measured Depth: 11458

WELL LOCATION INFORMATION

10. QtrQtr: NENW Sec: 10 Twp: 8S Rng: 96W Meridian: 6
Latitude: 39.368447 Longitude: -108.099033

Footage at Surface: 1104 FNL 1603 FWL

11. Field Name: Grand Valley Field Number: 31290

12. Ground Elevation: 5570.5 13. County: GARFIELD

14. GPS Data:
Date of Measurement: 06/11/2008 PDOP Reading: 4.8 Instrument Operator's Name: C. D. Slauch

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
1624 FNL 2486 FEL 2360 FNL 850 FEL
Sec: 10 Twp: 8S Rng: 96W Sec: 10 Twp: 8S Rng: 96W

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: 2580 ft
18. Distance to nearest property line: 295 ft 19. Distance to nearest well permitted/completed in the same formation: 155 ft

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.)
Cedar Mtn	CDRMTN			
Dakota	DKT			
Frontier	FRTR			
Iles	ILES			
Mancos	MNCS			
Niobrara	NBR			
Williams Fork	WMFK			

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):
T8S-R96W, Sec. 10: SENE

25. Distance to Nearest Mineral Lease Line: 240 ft 26. Total Acres in Lease: 40

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	24+0/0	20+0/0	.25 wall	40	4	40	0
SURF	17+1/2	13+3/8	68	1,300	905	1,300	0
1ST	12+1/4	9+5/8	40	6,416	1,186	6,416	0
3RD	8+3/4	5+1/2	17	11,459	1,273	10	500

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

33. Comments This pad has been built and contains existing wells. No drilling is currently going on. No pits will be required for the drilling of this well. Nothing has changed from the original APD. A sundry was submitted 4/7/09 to add additional formation objectives of the Frontier, Dakota & Cedar Mtn., original depth stayed the same. No changes have been made to the surrounding land. The mineral lease has not changed. The directional drilling plan has not changed.

34. Location ID: 334093

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: DeAnne Spector

Title: Regulatory Analyst Date: _____ Email: deanne.spector@encana.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 17947 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
400040629	LOCATION PHOTO	photos.pdf

Total Attach: 1 Files