

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:

2096355

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: BP AMERICA PRODUCTION COMPANY 4. COGCC Operator Number: 100005. Address: 501 WESTLAKE PARK BLVDCity: HOUSTON State: TX Zip: 770796. Contact Name: SUSAN FOLK Phone: (970)335-3828 Fax: (970)335-3837Email: SUSAN.FOLK@BP.COM7. Well Name: MORRISON, HUBERT GU A Well Number: 4

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

9. Proposed Total Measured Depth: 2651

WELL LOCATION INFORMATION

10. QtrQtr: SENW Sec: 17 Twp: 34N Rng: 6W Meridian: NLatitude: 37.217630 Longitude: -107.554990
 Footage at Surface: 1122 FNL/FSL FSL 1483 FEL/FWL FWL
11. Field Name: IGNACIO BLANCO Field Number: 3830012. Ground Elevation: 6875 13. County: LA PLATA

14. GPS Data:

Date of Measurement: 09/02/2008 PDOP Reading: 3.7 Instrument Operator's Name: BILL MITCHELL15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**
 Footage at Top of Prod Zone: FNL/FSL 683 FSL 2207 FWL FWL Bottom Hole: FNL/FSL 665 FSL 2237 FWL FWL
 Sec: 17 Twp: 34N Rng: 6W Sec: 17 Twp: 34N Rng: 6W
16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 955 ft18. Distance to nearest property line: 177 ft 19. Distance to nearest well permitted/completed in the same formation: 846 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.)
FRUITLAND COAL	FRLDC	112-214	320	N/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):
S/2NE/4NW/4, SE/4NW4, SECTION 17,T34N, R6W PLUS ADDITIONAL ACRES.

25. Distance to Nearest Mineral Lease Line: 403 ft 26. Total Acres in Lease: 90

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: RECYCLE/REUSE

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	20	390	260	390	0
1ST	7+7/8	5+1/2	15.5	2,651	185	2,651	0

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

33. Comments **6. LOCATION CONSTRUCTED UNDER ORIGINAL APD. DRILLING HAS NOT YET TAKEN PLACE ON THE SITE. THERE HAVE BEEN NO CHANGES IN SURFACE LOCATION OR LAYOUT FOR THE WELL. SUA IS STILL VALID. . WAIVER TO THE 30 DAY NOTICE (RULE 305) & CONSULTATON (RULE 306) CAN BE FOUND IN THE TTACHED SUA. NO CONDUCTOR CASING WILL BE USED.**

34. Location ID: 306913

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: SUSAN FOLK

Title: PERMITTING Date: 2/18/2010 Email: SUSAN.FOLK@BP.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

05 067 09750 00

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
2096355	APD ORIGINAL	LF@2422520 2096355
2096357	MINERAL LEASE MAP	LF@2422521 2096357
2096358	SURFACE AGRMT/SURETY	LF@2422522 2096358

Total Attach: 3 Files