

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:

1828682

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 OIL CORPORATION 4. COGCC Operator Number: 28700

5. Address: P O BOX 4358 WGR RM 310

City: HOUSTON State: TX Zip: 77210-4358

6. Contact Name: LYNN NEELY Phone: (281)654-1927 Fax: (281)654-1940

Email: \_\_\_\_\_

7. Well Name: PICEANCE CREEK UNIT Well Number: 297-12A3

8. Unit Name (if appl): PICEANCE CREEK Unit Number: COC-47666X

9. Proposed Total Measured Depth: 13750

WELL LOCATION INFORMATION

10. QtrQtr: NWSW Sec: 12 Twp: 2S Rng: 97W Meridian: 6

Latitude: 39.888990 Longitude: -108.237219

Footage at Surface: 1725 FNL/FSL FSL 303 FEL/FWL FWL

11. Field Name: PICEANCE CREEK Field Number: 68800

12. Ground Elevation: 7185 13. County: RIO BLANCO

14. GPS Data:

Date of Measurement: 10/16/2005 PDOP Reading: 2.3 Instrument Operator's Name: C. MILLER

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

Footage at Top of Prod Zone: FNL/FSL 1585 FSL 2755 FEL 1858 FEL/FWL 2755 FEL

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: 350 ft

18. Distance to nearest property line: 493 ft 19. Distance to nearest well permitted/completed in the same formation: 932 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: 1585 ft 26. Total Acres in Lease: 2060

### 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	16		130	130	130	0
SURF	14+3/4	10	45.5	3,800	1,210	3,800	0
1ST	9+7/8	7	26	8,700	735	8,700	3,300
2ND	6+1/8	4+1/2	15	13,000	240	13,000	6,400

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. BOTTOM HOLE TARGET HAS NOT CHANGED FROM ORIGINAL APD.

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: Y Print Name: LYNN NEELY

Title: PERMIT ANALYST Date: 11/19/2008 Email: LYNN.R.NEELY@EXXONMOB

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: David S. Neslin Director of COGCC Date: 11/9/2009

Permit Number: \_\_\_\_\_ Expiration Date: 11/8/2010

API NUMBER

05 103 11160 01

CONDITIONS OF APPROVAL, IF ANY:

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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.