

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:

2096825

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) INC4. COGCC Operator Number: 1001855. Address: 370 17TH ST STE 1700City: DENVER State: CO Zip: 80202-56326. Contact Name: JUDITH A. WALTER Phone: (720)876-3702 Fax: (720)876-4702Email: JUDITH.WALTER@ENCANA.COM7. Well Name: DOUGLAS PASS COM B Well Number: 77028. Unit Name (if appl): DOUGLAS PASS Unit Number: COC47614A9. Proposed Total Measured Depth: 8210

WELL LOCATION INFORMATION

10. QtrQtr: SENW Sec: 10 Twp: 5S Rng: 102W Meridian: 6Latitude: 39.640121 Longitude: -108.832886

FNL/FSL

FEL/FWL

Footage at Surface: 2319 FNL 1983 FWL11. Field Name: ROCK CANYON Field Number: 7400512. Ground Elevation: 8846 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 01/31/2007 PDOP Reading: 3.1 Instrument Operator's Name: BRIAN BAKER15. 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 ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 2 mi18. Distance to nearest property line: 631 ft 19. Distance to nearest well permitted/completed in the same formation: 6650 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.)
MANCOS	MNCS			

21. Mineral Ownership: ☐ Fee ☐ State ☒ Federal ☐ Indian Lease #: COC16982

22. Surface Ownership: ☒ Fee ☐ State ☐ Federal ☐ Indian

23. Is the Surface Owner also the Mineral Owner? ☒ Yes ☐ No Surface Surety ID#: 20050043

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):
T5S, R102W, 6TH PM, SEC 10: ALL; SEC 15: N2; SEC 16: NE

25. Distance to Nearest Mineral Lease Line: 1983 ft 26. Total Acres in Lease: 1120

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	17+1/2	13+3/8	61	900	987	900	0
1ST	12+1/4	9+5/8	36	4,318	1,086	4,318	0
2ND	8+3/4	5+1/2	15.5	8,205	150	8,205	7,300

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

33. Comments API #05-045-06119. ENCANA INTENDS TO REMAIN WITHIN THE ORIGINAL AREA OF DISTURBANCE FOR THESE PROCEDURES. NOTE: THERE IS 2000' OF 17# IN THE HOLE, LOCATION UNKNOWN. CONSULTATION PURSUANT TO RULE 306 HAS TAKEN PLACE.

34. Location ID: 322365

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: JUDITH A. WALTER

Title: REGULATORY Date: 2/26/2010 Email: JUDITH.WALTER@ENCANA.C

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

05 045 06119 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
2096825	APD ORIGINAL	LF @2426617 2096825

Total Attach: 1 Files