

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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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

Document Number:

2585883

Plugging Bond Surety

3. Name of Operator: BARRETT CORPORATION* BILL 4. COGCC Operator Number: 10071

5. Address: 1099 18TH ST STE 2300
City: DENVER State: CO Zip: 80202

6. Contact Name: MATT BARBER Phone: (303)312-8168 Fax: (303)291-0420
Email: MBARBER@BILLBARRETTCORP.COM

7. Well Name: GGU MILLER FED Well Number: 52500

8. Unit Name (if appl): GIBSONGULCHUNIT Unit Number: COC-052447X

9. Proposed Total Measured Depth: 7613

WELL LOCATION INFORMATION

10. QtrQtr: SESW Sec: 32 Twp: 6S Rng: 91W Meridian: 6
Latitude: 39.480590 Longitude: -107.578770

Footage at Surface: 1284 FNL/FSL FSL 2315 FEL/FWL FWL

11. Field Name: MAMM CREEK Field Number: 52500

12. Ground Elevation: 6119.2 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 08/31/2009 PDOP Reading: 1.8 Instrument Operator's Name: D. SLAUGH

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

Footage at Top of Prod Zone: FNL/FSL 2163 FSL 1990 FEL FEL Bottom Hole: FNL/FSL 2163 FSL 1990 FEL FEL
Sec: 32 Twp: 6S Rng: 91W Sec: 32 Twp: 6S Rng: 91W

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: 3178 ft

18. Distance to nearest property line: 342 ft 19. Distance to nearest well permitted/completed in the same formation: 328 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.)
ILES	ILES	191-65		
WILLIAMS FORK	WMFK	191-9		

21. Mineral Ownership: Fee State Federal Indian Lease #: COC 46972

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):
T6S R91W SEC29: E2E2, NWNE, SWSE, SEC. 32: E2, NENW - SEE ATTACHED LEASE BOUNDARY MAP

25. Distance to Nearest Mineral Lease Line: 659 ft 26. Total Acres in Lease: 600

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: EVAPORATION & BACKFIL

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	26	42	40		40	
SURF	12+1/4	9+5/8	36	800	250	800	
1ST	8+3/4	4+1/2	11.6	7,613	510	7,613	

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

33. Comments **THERE IS NO VISIBLE IMPROVEMENT WITHIN 400' (SEE SHEET 2N). THIS WELL IS LOCATED AT THE PENDING MDP PAD #6 FORM 2A. THE WELL IS APPROVED UNDER AN ENVIRONMENTAL ASSESSMENT THROUGH THE BLM GLENWOOD SPREINS CO OFFICE**

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: _____ Print Name: MATT BARBER

Title: PERMIT ANALYST Date: 1/21/2010 Email: MBARBER@BILLBARRETTCO

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 Permit Number: _____ Expiration Date: _____

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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
2585883	APD ORIGINAL	LF@2434625 2585883
2585884	WELL LOCATION PLAT	LF@2434626 2585884
2585885	TOPO MAP	LF@2434627 2585885
2585886	MINERAL LEASE MAP	LF@2434628 2585886
2585887	DRILLING PLAN	LF@2434629 2585887
2585888	DEVIATED DRILLING PLAN	LF@2434630 2585888
2585889	FED. DRILLING PERMIT	LF@2434631 2585889
2585894	SURFACE AGRMT/SURETY	LF@2434632 2585894
400047542	FORM 2 SUBMITTED	400047542.pdf

Total Attach: 9 Files