

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

Refilling
Sidetrack

Document Number:
2095476
Plugging Bond Surety
20100017

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)876-5286 Fax: (720)876-6060
Email: DEANNE.SPECTOR@ENCANA.COM

7. Well Name: FEDERAL Well Number: 24-16 (OP24)

8. Unit Name (if appl): ORCHARD Unit Number: 66496x

9. Proposed Total Measured Depth: 9588

WELL LOCATION INFORMATION

10. QtrQtr: SESE Sec: 24 Twp: 8S Rng: 97W Meridian: 6
Latitude: 39.339900 Longitude: -108.160500

Footage at Surface: 474 FNL/FSL FSL 538 FEL/FWL FEL

11. Field Name: GRAND VALLEY Field Number: 31290

12. Ground Elevation: 5549 13. County: MESA

14. GPS Data:

Date of Measurement: 07/08/2005 PDOP Reading: 0.0 Instrument Operator's Name: STACY STEWART

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

Footage at Top of Prod Zone: FNL/FSL 660 FSL 660 FEL 660 FEL 660
Bottom Hole: FNL/FSL 660 FSL 660 FEL 660 FEL 660
Sec: 24 Twp: 8S Rng: 97W Sec: 24 Twp: 8S Rng: 97W

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: 1 mi

18. Distance to nearest property line: 474 ft 19. Distance to nearest well permitted/completed in the same formation: 1315 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.)
DAKOTA	DKTA			
ILES	ILES			
MANCOS	MNCAB			
MOWRY	MWRY			
NIOBRARA	NBRR			
WILLIAMS FORK	WMFK			

21. Mineral Ownership: Fee State Federal Indian Lease #: COC58681

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 R97W SEC 24: SE S2SW, SEC 25: NWNE NENW

25. Distance to Nearest Mineral Lease Line: 660 ft 26. Total Acres in Lease: 320

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	16	LINEPIPE	40	5	40	0
SURF	12+1/4	9+5/8	36	1,850	690	1,850	0
1ST	8+3/4	5+1/2	17	9,588	1,690	9,588	

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

33. Comments _____

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: DEANNE SPECTOR

Title: REGULATORY Date: 8/13/2009 Email: DEANNE.SPECTOR@ENCAN

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: 3/31/2010

API NUMBER: **05 077 08963 00** Permit Number: _____ Expiration Date: 3/30/2011

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.

1)24 HOUR NOTICE TO MOVE ON LOCATION REQUIRED. E-MAIL: Shaun.Kellerby@state.co.us 2)THE PROPOSED SURFACE CASING IS MORE THAN 50' BELOW THE DEPTH OF THE DEEPEST WATER WELL WITHIN 1MILE OF THE SURFACE LOCATION WHEN CORRECTED FOR ELEVATION DIFFERENCES. THE DEEPEST WATER WELL WITHIN 1 MILE IS 35 FEET DEEP.

Attachment Check List

Att Doc Num	Name	Doc Description
2095476	APD ORIGINAL	LF@2265737 2095476
400039032	FORM 2 SUBMITTED	LF@2426873 400039032

Total Attach: 2 Files