

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:

400056310

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: BARRETT CORPORATION* BILL4. COGCC Operator Number: 100715. Address: 1099 18TH ST STE 2300City: DENVER State: CO Zip: 802026. Contact Name: Matt Barber Phone: (303)312-8168 Fax: (303)291-0420Email: mbarber@billbarrettcorp.com7. Well Name: GGU Federal Well Number: 43B-29-6918. Unit Name (if appl): Gibson Gulch Unit Number: COC-052447X9. Proposed Total Measured Depth: 7585

WELL LOCATION INFORMATION

10. QtrQtr: NWSE Sec: 29 Twp: 6S Rng: 91W Meridian: 6Latitude: 39.496650 Longitude: -107.575706Footage at Surface: 1825 FNL/FSL FSL 2059 FEL/FWL FEL11. Field Name: Mamm Creek Field Number: 5250012. Ground Elevation: 6030.8 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 03/23/2010 PDOP Reading: 2.7 Instrument Operator's Name: D. Slaugh15. 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
<u>1712</u>	<u>FSL</u>	<u>664</u>	<u>1712</u>	<u>FSL</u>	<u>664</u>
		<u>FEL</u>			<u>FEL</u>
Sec: <u>29</u>	Twp: <u>6S</u>	Rng: <u>91W</u>	Sec: <u>29</u>	Twp: <u>6S</u>	Rng: <u>91W</u>

16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 301 ft18. Distance to nearest property line: 509 ft 19. Distance to nearest well permitted/completed in the same formation: 352 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	191-9		
Williams Fork	WMFK	191-65		

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):
Please see attached lease map

25. Distance to Nearest Mineral Lease Line: 664 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 & Backfilling

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	42#	40		40	0
SURF	12+1/4	9+5/8	36#	760	240	760	0
1ST	8+3/4	4+1/2	11.6#	7,585	510	7,585	

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

33. Comments SEE ADDENDUM TO LEGAL PLAT (SHEET 2o) FOR VISIBLE IMPROVEMENTS WITHIN 400'. A NEW LOCATION ASSESSMENT HAS BEEN SUBMITTED FOR THE PROPOSED PAD EXPANSION: GGU FED (MDP #15) 34D-29-691 (DOC:400056347). IN ADDITION, THIS WELL IS APPROVED UNDER A FEDERAL ENVIRONMENTAL ASSESSMENT THROUGH THE BLM SILT, CO. OFFICE. PRODUCTION CEMENT TOP IS 500' ABOVE TOP OF SURFACE. PRODUCTINO STRING SECOND HOLE SIZE = 7 7/8.

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: _____ Email: mbarber@billbarrettcorp.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: _____

API NUMBER

05

Permit Number: _____ Expiration Date: _____

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
400056328	DEVIATED DRILLING PLAN	GGU Federal 43B-29-691 Directional Plan.pdf
400056329	DRILLING PLAN	WBD GGU Swanson Federal 43B-29-691.pdf
400056330	WELL LOCATION PLAT	43B.pdf
400056331	ACCESS ROAD MAP	Access Road Map.pdf
400056332	LEASE MAP	Lease Map.pdf
400056333	LOCATION DRAWING	Location Drawing.pdf
400056430	OTHER	Addendum.pdf
400056701	SURFACE AGRMT/SURETY	Swanson Memo SUA 12-22-2005.pdf

Total Attach: 8 Files