

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



DE ET OE ES

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:
400016304
Plugging Bond Surety
20050043

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)876-5826 Fax: (720)876-6060
Email: deanne.spector@encana.com

7. Well Name: Federal Well Number: 25-2BB (PH25)

8. Unit Name (if appl): _____ Unit Number: _____

9. Proposed Total Measured Depth: 7222

WELL LOCATION INFORMATION

10. QtrQtr: SENE Sec: 25 Twp: 7S Rng: 96W Meridian: 6
Latitude: 39.410440 Longitude: -108.050970

Footage at Surface: 1956 FNL/FSL FNL 644 FEL/FWL FEL

11. Field Name: Parachute Field Number: 67350

12. Ground Elevation: 6064 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 01/14/2009 PDOP Reading: 6.0 Instrument Operator's Name: Ted Taggart

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

Footage at Top of Prod Zone: FNL/FSL 250 FNL 1980 FEL 250 FEL 1980 FEL
Sec: 25 Twp: 7S Rng: 96W Sec: 25 Twp: 7S Rng: 96W

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: 1330 mi

18. Distance to nearest property line: 250 ft 19. Distance to nearest well permitted/completed in the same formation: 668 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	139-46	20	ALL
Williams Fork	WMFK	139-44	20	ALL

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#: 20090119

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):
Sec. 25 T7S-R96W N/2

25. Distance to Nearest Mineral Lease Line: 250 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+0/0	16+0/0	65	40	5	40	0
SURF	12+1/4	8+5/8	24	1,100	2,067	1,100	0
1ST	7+7/8	4+1/2	11.6	7,222	658	7,222	3,706

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

33. Comments The Federal 25-2BB is part of the S. Parachute GAP Master APD. Please refer to this document for drilling information. A one page site specific drill plan is included in the attachments.

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 Analyst Date: 11/24/2009 Email: deanne.spector@encana.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: David S. Nash Director of COGCC Date: 2/10/2010

API NUMBER
05 045 19122 00

Permit Number: _____ Expiration Date: 2/9/2012

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 SPUD NOTICE REQUIRED. E-MAIL: david.andrews@state.co.us 2)GARFIELD COUNTY RULISON FIELD NOTICE TO OPERATORS. NOTE: ALL NOTICES SHALL BE GIVEN VIA E-MAIL. SEE ATTACHED NOTICE 3)CEMENT TOP VERIFICATION BY CBL REQUIRED. 4)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 135 FEET DEEP.

Attachment Check List

Att Doc Num	Name	Doc Description
400016422	DEVIATED DRILLING PLAN	LF@2200608 400016422
400016423	DRILLING PLAN	LF@2200609 400016423
400018048	PLAT	LF@2200610 400018048
400018049	CONST. LAYOUT DRAWINGS	LF@2200611 400018049
400018052	TOPO MAP	LF@2200612 400018052
400018053	ACCESS ROAD MAP	LF@2200613 400018053
400018054	FED. DRILLING PERMIT	LF@2200614 400018054
400018055	LOCATION PHOTO	LF@2200615 400018055
400018057	FORM 2 SUBMITTED	LF@2200616 400018057

Total Attach: 9 Files