

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:  
400021852  
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: MIRACLE PFISTER Phone: (720)876-3761 Fax: (720)876-6060  
Email: miracle.pfister@encana.com

7. Well Name: GMR Well Number: 8-11A2 (K8W)

8. Unit Name (if appl): \_\_\_\_\_ Unit Number: \_\_\_\_\_

9. Proposed Total Measured Depth: 10036

WELL LOCATION INFORMATION

10. QtrQtr: NESW Sec: 8 Twp: 7S Rng: 93W Meridian: 6  
Latitude: 39.457951 Longitude: -107.799911

Footage at Surface: 1868 <sup>FNL/FSL</sup> FSL 1920 <sup>FEL/FWL</sup> FWL

11. Field Name: MAMM CREEK Field Number: 52500

12. Ground Elevation: 7826 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 09/29/2009 PDOP Reading: 0.0 Instrument Operator's Name: D. SLAUGH

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

Footage at Top of Prod Zone: <sup>FNL/FSL</sup> 2110 <sup>FEL/FWL</sup> FSL 2360 <sup>FNL/FSL</sup> 2110 <sup>FEL/FWL</sup> FSL 2360 <sup>FNL/FSL</sup> 2110 <sup>FEL/FWL</sup> FSL 2360 <sup>FNL/FSL</sup> 2110 <sup>FEL/FWL</sup> FSL 2360 <sup>FNL/FSL</sup> 2110 <sup>FEL/FWL</sup> FSL 2360 <sup>FNL/FSL</sup> 2110 <sup>FEL/FWL</sup> FSL 2360  
Sec: 8 Twp: 7S Rng: 93W Sec: 8 Twp: 7S Rng: 93W

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: 3280 ft

18. Distance to nearest property line: 623 ft 19. Distance to nearest well permitted/completed in the same formation: 434 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	139-98	20	
WILLIAMS FORK	WMFK	139-98	10	

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):  
 T7S-R93W 6TH PM SEC 4: LOTS 1, 2, E/2SW/4 SEC 8: S/2NW/4, N/2SW/4 SEC 9: E/2W/2, NW/4NE/4 SEC 16: SW/4NW/4, NW/4SW/4 SEC 17: E/2SE/4

25. Distance to Nearest Mineral Lease Line: 154 ft 26. Total Acres in Lease: 643

**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	20	16	LINEPIPE	40	5	40	0
SURF	12+1/4	9+5/8	36	1,250	703	1,250	0
1ST	8+3/4	4+1/2	11.6	10,036	1,089	10,036	0

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

33. Comments EXISTING LOCATION THAT WILL BE EXPANDED TO DRILL ADDITIONAL WELLS. TOP OF CEMENT FOR PRODUCTION CASING WILL BE 500' ABOVE TOG.

34. Location ID: 311645

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: MIRACLE PFISTER

Title: REGULATORY ANALYST Date: 12/12/2009 Email: miracle.pfister@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. Neslin Director of COGCC Date: 2/18/2010

API NUMBER: **05 045 19151 00** Permit Number: \_\_\_\_\_ Expiration Date: 2/17/2012

**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) NEW MAMM CREEK FIELD NOTICE TO OPERATORS APPLIES TO THIS WELL. NOTE: ALL NOTICES SHALL BE GIVEN VIA E-MAIL. SEE ATTACHED NOTICE. (4) THE MOISTURE CONTENT OF ANY DRILL CUTTINGS IN A CUTTINGS PIT, TRENCH, OR PILE SHALL BE AS LOW AS PRACTICABLE TO PREVENT ACCUMULATION OF LIQUIDS GREATER THAN DE-MINIMIS AMOUNTS. AT THE TIME OF CLOSURE, THE DRILL CUTTINGS MUST ALSO MEET THE APPLICABLE STANDARDS OF TABLE 910-1. (5) THE PROPOSED SURFACE CASING IS MORE THAN 50' BELOW THE DEPTH OF THE DEEPEST WATER WELL WITHIN 1-MILE OF THE SURFACE LOCATION WHEN CORRECTED FOR ELEVATION DIFFERENCES. THE DEEPEST WATER WELL WITHIN 1-MILE IS 320 FEET DEEP.

### Attachment Check List

Att Doc Num	Name	Doc Description
400021853	FORM 2 SUBMITTED	LF@2203535 400021853
400021854	DEVIATED DRILLING PLAN	LF@2203536 400021854
400021855	PLAT	LF@2203537 400021855
400021856	SURFACE AGRMT/SURETY	LF@2203538 400021856

Total Attach: 4 Files