

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

Refilling
Sidetrack

Document Number:
2094110
Plugging Bond Surety
20060153

3. Name of Operator: EXXON MOBIL CORPORATION 4. COGCC Operator Number: 28600

5. Address: P O BOX 4358
City: HOUSTON State: TX Zip: 77210-4358

6. Contact Name: MARK DEL PICO Phone: (281)654-1926 Fax: (281)654-1940
Email: MARK.DELPICO@EXXONMOBIL.COM

7. Well Name: FREEDOM UNIT Well Number: 197-21A1

8. Unit Name (if appl): FREEDOM UNIT Unit Number: COC-069547X

9. Proposed Total Measured Depth: 13350

WELL LOCATION INFORMATION

10. QtrQtr: NWNE Sec: 21 Twp: 1S Rng: 97W Meridian: 6
Latitude: 39.954827 Longitude: -108.283336

Footage at Surface: 889 FNL/FSL FNL 1518 FEL/FWL FEL

11. Field Name: PICEANCE CREEK Field Number: 68800

12. Ground Elevation: 6064 13. County: RIO BLANCO

14. GPS Data:

Date of Measurement: 11/22/2006 PDOP Reading: 2.6 Instrument Operator's Name: D. PETTY

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

Footage at Top of Prod Zone: FNL/FSL 1730 FNL 1735 FEL 1730 FEL 1735 FEL
Bottom Hole: FNL/FSL 1730 FNL 1735 FEL
Sec: 21 Twp: 1S Rng: 97W Sec: 21 Twp: 1S 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: 1000 ft

18. Distance to nearest property line: 216 ft 19. Distance to nearest well permitted/completed in the same formation: 929 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.)
MESAVERDE	MVRD			
OHIO CREEK	OHCRK			
WASATCH	WSTC			

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):
SEE ATTACHED MAP AND MINERAL LEASE DESCRIPTION

25. Distance to Nearest Mineral Lease Line: 398 ft 26. Total Acres in Lease: 400

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: BURIAL

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	LINE PIPE	120	280	120	0
SURF	14+3/4	10+3/4	45.5	3,850	2,130	3,800	0
1ST	9+7/8	7	23	9,200	1,580	9,200	3,300
2ND	6+1/8	4+1/2	15.1	13,350	660	13,350	6,650

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

33. Comments SEE ATTACHED FEDERAL APPLICATION FOR ADDITIONAL DETAILS AND SEE ATTACHMENT FOR COMMENTS ON ITEMS 29 & 30, AND CASING CEMENTING PROGRAM AND REQUEST FOR EXCEPTION OF RULE 317. BLM LEASE COVERS SURFACE. PER M.D.P. 5 FEB '10.

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: MARK DEL PICO

Title: STAFF REG SPECIALIST Date: 1/7/2010 Email: MARK.DELPICO@EXXONMO

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. Nesline Director of COGCC Date: 3/19/2010

API NUMBER: **05 103 11657 00** Permit Number: _____ Expiration Date: 3/17/2012

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: Shaun.Kellerby@state.co.us 2)CEMENT TOP VERIFICATION BY CBL REQUIRED. 3)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 200 FEET DEEP.

Attachment Check List

Att Doc Num	Name	Doc Description
2094111	WELL LOCATION PLAT	LF@2217625 2094111
2094112	TOPO MAP	LF@2217657 2094112
2094113	TOPO MAP	LF@2217658 2094113
2094114	MINERAL LEASE MAP	LF@2217628 2094114
2094115	DEVIATED DRILLING PLAN	LF@2217629 2094115
2094116	FED. DRILLING PERMIT	LF@2217630 2094116
2094790	SURFACE PLAN	LF@2217632 2094790
2094791	PROPOSED BMPs	LF@2217767 2094791
2094792	DRILLING PLAN	LF@2217633 2094792
400031985	FORM 2 SUBMITTED	LF@2334729 400031985
400050396	APD ORIGINAL	LF@2217624 400050396

Total Attach: 11 Files