

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:

2096817

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: JULIA M. CARTER Phone: (720)876-5240 Fax: (720)876-6240  
Email: JULIA.CARTER@ENCANA.COM

7. Well Name: DOUGLAS CREEK UNIT Well Number: 62

8. Unit Name (if appl): DOUGLAS CREEK Unit Number: COC047613  
B

9. Proposed Total Measured Depth: 4500

WELL LOCATION INFORMATION

10. QtrQtr: SWSW Sec: 5 Twp: 3S Rng: 101W Meridian: 6  
Latitude: 39.811266 Longitude: -108.759194

Footage at Surface: 760 FNL/FSL FSL 1299 FEL/FWL FWL

11. Field Name: DOUGLAS CREEK Field Number: 17600

12. Ground Elevation: 6334 13. County: RIO BLANCO

14. GPS Data:

Date of Measurement: 01/19/2007 PDOP Reading: 2.0 Instrument Operator's Name: BRIAN BAKER

15. 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 \_\_\_\_\_  
Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_ Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_

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: 1320 ft

18. Distance to nearest property line: 759 ft 19. Distance to nearest well permitted/completed in the same formation: 3089 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.)
MANCOS	MNCS			

21. Mineral Ownership: ☐ Fee ☐ State ☒ Federal ☐ Indian Lease #: COD034909

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):  
T2S-R101W: SEC 32 S/2; SEC 33 SW. T3S-R101W: SEC 4 S2N2, S2, LOTS 9-12; SEC 5 S2N2, S2, LOTS 5-8 SEC 6 S2NE, SE, LOTS 8-10; 8 NE; SEC 9 NW.

25. Distance to Nearest Mineral Lease Line: 759 ft 26. Total Acres in Lease: 2553

### 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: RECYCLE & BURY

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
SURF	12+1/4	9+5/8	36	218	100	218	0
1ST	7+7/8	5+1/2	15.5	4,495	490	4,495	0

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

33. Comments API #05-103-09697. ENCANA INTENDS TO REMAIN WITHIN THE ORIGINAL AREA OF DISTURBANCE FOR THESE PROCEDURES.

34. Location ID: 311831

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: JULIA M. CARTER

Title: REGULATORY Date: 2/26/2010 Email: JULIA.CARTER@ENCANA.CO

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: 5/4/2010

#### API NUMBER

05 103 09697 00

Permit Number: \_\_\_\_\_ Expiration Date: 5/3/2011

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 000 FEET DEEP. 3)LOCATION IS IN A SENSITIVE AREA BECAUSE OF SHALLOW GROUNDWATER; THEREFORE, EITHER ALL PITS MUST BE LINED OR CLOSED LOOP SYSTEM MUST BE IMPLEMENTED. 4)LOCATION IS IN A SENSITIVE AREA BECAUSE OF PROXIMITY TO SURFACE WATER; THEREFORE, OPERATOR MUST ENSURE 110 PERCENT SECONDARY CONTAINMENT FOR ANY VOLUME OF FLUIDS CONTAINED AT WELL SITE DURING COMPLETION/RECOMPLETION OPERATIONS. 5) OPERATOR MUST IMPLEMENT BEST MANAGEMENT PRACTICES TO CONTAIN ANY UNINTENTIONAL RELEASE OF FLUIDS. 6)FLOWBACK FROM FRACING PROCEDURES NEEDS TO BE DIRECTED TO TANKS ONLY.

### **Attachment Check List**

Att Doc Num	Name	Doc Description
2096817	APD ORIGINAL	LF@2434438 2096817
400044960	FORM 2 SUBMITTED	LF@2435846 400044960

Total Attach: 2 Files