

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:

400068356

Plugging Bond Surety

20020067

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: 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 Carter Phone: (720)876.5240 Fax: (720)876.6240
 Email: Julia.Carter@Encana.com
 7. Well Name: N. Parachute Well Number: EF05D C27 595
 8. Unit Name (if appl): _____ Unit Number: _____
 9. Proposed Total Measured Depth: 9990

WELL LOCATION INFORMATION

10. QtrQtr: NENW Sec: 27 Twp: 5S Rng: 95W Meridian: 6
 Latitude: 39.589264 Longitude: -108.044389
 Footage at Surface: 1013 FNL/FSL FNL 1563 FEL/FWL FWL
 11. Field Name: Grand Valley Field Number: 31290
 12. Ground Elevation: 6375 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 05/22/2007 PDOP Reading: 2.9 Instrument Operator's Name: Greg Olsen

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

Footage at Top of Prod Zone: FNL/FSL 2310 FNL 990 FWL 2310 FNL 990 FWL
 Bottom Hole: FNL/FSL 2310 FNL 990 FWL
 Sec: 27 Twp: 5S Rng: 95W Sec: 27 Twp: 5S Rng: 95W

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: 3 mi

18. Distance to nearest property line: 3705 ft 19. Distance to nearest well permitted/completed in the same formation: 1325 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.)
Wasatch	WSTC	510-13		

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 maps on file

25. Distance to Nearest Mineral Lease Line: 4188 ft 26. Total Acres in Lease: 25889

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	2,062	785	2,062	0
1ST	7+7/8	5+1/2	17	9,787	1,640	9,787	2,340

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

33. Comments API # 05-045-10432. Encana intends to remain within the original area of disturbance for these procedures. Please note a Form 4 has also been submitted to accompany this permit.

34. Location ID: 335828

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 Analyst Date: _____ Email: Julia.Carter@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: _____ Director of COGCC Date: _____

API NUMBER 05 045 10432 01	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.