

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:
2589332
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: JEVIN CROTEAU Phone: (303)623-2300 Fax: (303)623-2400
Email: JEVIN.CROTEAU@ENCANA.COM

7. Well Name: SEGAL Well Number: 8-2-24

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

9. Proposed Total Measured Depth: 7861

WELL LOCATION INFORMATION

10. QtrQtr: SENE Sec: 24 Twp: 4N Rng: 66W Meridian: 6
Latitude: 40.299670 Longitude: -104.717570

Footage at Surface: 2031 FNL/FSL FNL 568 FEL/FWL FEL

11. Field Name: HAMBERT Field Number: 33530

12. Ground Elevation: 4733 13. County: WELD

14. GPS Data:

Date of Measurement: 01/22/2010 PDOP Reading: 4.9 Instrument Operator's Name: TOM WINANS

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

Footage at Top of Prod Zone: FNL/FSL 1310 FNL 50 FEL 50 FEL 50 Bottom Hole: FNL/FSL 1310 FNL 50 FEL 50
Sec: 24 Twp: 4N Rng: 66W Sec: 24 Twp: 4N Rng: 66W

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: 505 ft

18. Distance to nearest property line: 568 ft 19. Distance to nearest well permitted/completed in the same formation: 880 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.)
CODELL	CODL	407	160	GWA
J SAND	JSND	232-23	160	GWA
NIOBRARA	NBRR	407	160	GWA

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):
N2 OF SEC. 24, T4N, RF66W

25. Distance to Nearest Mineral Lease Line: 50 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
SURF	12+1/4	8+5/8	24	500	220	500	0
1ST	7+7/8	4+1/2	11.6	7,861	290	7,861	6,755

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

33. Comments NO CONDUCTOR CASING WILL BE USED. PROPOSED GWA SPACING UNIT: SEC 24 4N 66W: E2NE & SEC 19 4N 65W: W2NW

34. Location ID: 305979

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: JEVIN CROTEAU

Title: REGULATORY Date: 5/20/2010 Email: JEVIN.CROTEAU@ENCANA.C

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: 6/17/2010

API NUMBER
05 123 31760 00

Permit Number: _____ Expiration Date: 6/16/2012

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) Provide 24 hour notice of MIRU to Bo Brown at 970-397-4124 or e-mail at bo.brown@state.co.us.
- 2) Comply with Rule 317.i and provide cement coverage from TD to a minimum of 200' above Niobrara and from 200' below Sussex to 200' above Sussex. Verify coverage with cement bond log.
- 3) Comply with Rule 321. Run and submit Directional Survey from TD to base of surface casing. Ensure that the wellbore complies with setback requirements in commission orders or rules prior to producing the well.

Attachment Check List

Att Doc Num	Name	Doc Description
2589332	APD ORIGINAL	LF@2480159 2589332
2589333	WELL LOCATION PLAT	LF@2480160 2589333
2589334	TOPO MAP	LF@2480102 2589334
2589335	MINERAL LEASE MAP	LF@2480103 2589335
2589336	SURFACE AGRMT/SURETY	LF@2480161 2589336
2589337	30 DAY NOTICE LETTER	LF@2480162 2589337
2589338	DEVIATED DRILLING PLAN	LF@2480163 2589338
2589339	PROPOSED SPACING UNIT	LF@2480164 2589339

Total Attach: 8 Files