

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:

400072098

Plugging Bond Surety

20100017

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: 1001855. Address: 370 17TH ST STE 1700City: DENVER State: CO Zip: 80202-56326. Contact Name: MIRACLE PFISTER Phone: (720)876-3761 Fax: (720)876-4861Email: miracle.pfister@encana.com7. Well Name: EnCana Fee Well Number: 2-13C8. Unit Name (if appl): Hunter Mesa Unit Number: COC55972E9. Proposed Total Measured Depth: 6533

WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 11 Twp: 7S Rng: 92W Meridian: 6Latitude: 39.467606 Longitude: -107.643031Footage at Surface: 433 FNL/FSL FNL 18 FEL/FWL FWL11. Field Name: MAMM CREEK Field Number: 5250012. Ground Elevation: 6045 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 10/20/2006 PDOP Reading: 3.5 Instrument Operator's Name: CD SLAUGH15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**Footage at Top of Prod Zone: FNL/FSL 215 FSL 270 FWL 215 FSL 270 FWLSec: 2 Twp: 7S Rng: 92W Sec: 2 Twp: 7S Rng: 92W16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 212 ft18. Distance to nearest property line: 451 ft 19. Distance to nearest well permitted/completed in the same formation: 559 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			
Williams Fork	WMFK			

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-R92W 6TH PM SEC 2: TRACT OF LAND SITUATED IN THE SW/4SW/4 DESCRIBED BY METES AND BOUNDS.

25. Distance to Nearest Mineral Lease Line: 215 ft 26. Total Acres in Lease: 15

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	1,114	537	1,114	0
1ST	7+7/8	4+1/2	11.6	6,533	615	6,533	0

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

33. Comments EnCana is the surface owner for this pad. TOP OF CEMENT FOR THE PRODUCTION CASING IS 500' ABOVE TOG. There are changes to this well from the original permit that expired on 2/24/2010 including the well name, surface and bottom hole locations and drilling plans. This pad is not current built and no drilling rig is present.

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: MIRACLE PFISTER

Title: REGULATORY ANALYST Date: _____ 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: _____ Director of COGCC Date: _____

Permit Number: _____ Expiration Date: _____

API NUMBER

05 045 18258 00

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.

Attachment Check List

Att Doc Num	Name	Doc Description
400072122	DEVIATED DRILLING PLAN	EnCana Fee 2-13C Plan #2.pdf
400072123	PLAT	EnCana Fee 2-13C (A10E) Plat.pdf
400072126	WAIVERS	A10E Waiver Letter Signed by BBC.pdf
400072129	OTHER	A10E Waiver letter request.pdf

Total Attach: 4 Files