

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
----	----	----	----

Document Number:
400068389
Plugging Bond Surety
20010124

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: KERR-MCGEE OIL & GAS ONSHORE LP 4. COGCC Operator Number: 47120

5. Address: P O BOX 173779
City: DENVER State: CO Zip: 80217-3779

6. Contact Name: CHERYL LIGHT Phone: (720)929-6461 Fax: (720)929-7461
Email: cheryl.light@anadarko.com

7. Well Name: STROHAUER Well Number: 24-14

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

9. Proposed Total Measured Depth: 8037

WELL LOCATION INFORMATION

10. QtrQtr: NENE Sec: 14 Twp: 4N Rng: 65W Meridian: 6
Latitude: 40.317951 Longitude: -104.623007

Footage at Surface: 649 FNL/FSL FNL 595 FEL/FWL FEL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 4711 13. County: WELD

14. GPS Data:

Date of Measurement: 04/12/2010 PDOP Reading: 1.8 Instrument Operator's Name: TRAVIS KRAICH

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

Footage at Top of Prod Zone: FNL/FSL 2570 FNL 1315 FEL 2570 FNL 1315 FEL
Bottom Hole: FNL/FSL 2570 FNL 1315 FEL
Sec: 14 Twp: 4N Rng: 65W Sec: 14 Twp: 4N Rng: 65E

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: 501 ft

18. Distance to nearest property line: 601 ft 19. Distance to nearest well permitted/completed in the same formation: 827 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.)
J-SAND	JSND		320	E/2
NIOBRARA-CODELL	NB-CD	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):
T4N R65W SEC 14: W/2 AND NE/4

25. Distance to Nearest Mineral Lease Line: 73 ft 26. Total Acres in Lease: 480

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	600	420	600	
1ST	7+7/8	4+1/2	11.6	8,037	200	8,037	
1ST LINER							

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

33. Comments NO CONDUCTOR CASING WILL BE USED. PROPOSED SPACING UNIT IS S/2NE4, N/2SE4

34. Location ID: 326839

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: CHERYL LIGHT

Title: SR. REGULATORY ANALYST Date: 6/11/2010 Email: DJREGULATORY@ANADARK

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: 7/11/2010

API NUMBER: **05 123 31854 00** Permit Number: _____ Expiration Date: 7/10/2012

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 970-330-6085 or e-mail at bobrown@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
400068389	FORM 2 SUBMITTED	LF@2490447 400068389
400068399	WELL LOCATION PLAT	LF@2490448 400068399
400068400	TOPO MAP	LF@2490449 400068400
400068401	SURFACE AGRMT/SURETY	LF@2490450 400068401
400068402	30 DAY NOTICE LETTER	LF@2490451 400068402
400068403	DEVIATED DRILLING PLAN	LF@2490452 400068403
400068404	PROPOSED SPACING UNIT	LF@2490454 400068404
400068405	MULTI-WELL PLAN	LF@2490456 400068405
400068676	OIL & GAS LEASE	LF@2490458 400068676

Total Attach: 9 Files