

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:

400082309

Plugging Bond Surety

20100017

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: ROSE RANCH Well Number: 23-6C1 (A22W)8. Unit Name (if appl): HUNTER MESA Unit Number: COC 55972E9. Proposed Total Measured Depth: 9562

WELL LOCATION INFORMATION

10. QtrQtr: NENE Sec: 22 Twp: 7S Rng: 93W Meridian: 6Latitude: 39.436328 Longitude: -107.752853Footage at Surface: 769 FNL/FSL FNL 440 FEL/FWL FEL11. Field Name: MAMM CREEK Field Number: 5250012. Ground Elevation: 6790.2 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 05/25/2010 PDOP Reading: 2.0 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 2505 FNL 1715 FWL 2505 FNL 1715 FWLSec: 23 Twp: 7S Rng: 93W Sec: 23 Twp: 7S Rng: 93W16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 215 ft18. Distance to nearest property line: 97 ft 19. Distance to nearest well permitted/completed in the same formation: 576 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-R93W 6TH PM SECTION 22: SE SECTION 23: NWNE, E2NW, SWNW, NWSW SECTION 27: NENE, W2NE, E2NW, NWSE, NESW

25. Distance to Nearest Mineral Lease Line: 97 ft 26. Total Acres in Lease: 640

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	24	16	LINEPIPE	40	5	40	0
SURF	12+1/4	9+5/8	36	1,434	380	1,434	0
1ST	8+3/4	4+1/2	11.6	9,562	606	9,562	0

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

33. Comments TOP OF PRODUCTION CEMENT WILL BE 500' ABOVE TOG.

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: _____

API NUMBER 05	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.

Attachment Check List

Att Doc Num	Name	Doc Description
400082321	30 DAY NOTICE LETTER	30 Day Drilling Notice - Rose Ranch A22W 6-23-2010.pdf
400082322	SURFACE AGRMT/SURETY	A22W SDA-Rose Ranch.pdf
400082323	OTHER	Rose Ranch Fee 23-6C1 variance request letter.pdf
400082325	DEVIATED DRILLING PLAN	Rose Ranch 23-6C1 Plan #1.pdf
400082326	PLAT	Rose Ranch 23-6C1 Plat (06-09-10)-7.pdf
400082327	OTHER	Rose Ranch 23-6C1 e-mail correction for BH location on variance.pdf

Total Attach: 6 Files