

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:

400086764

Plugging Bond Surety

3. Name of Operator: WHITING OIL AND GAS CORPORATION

4. COGCC Operator Number: 96155

5. Address: 1700 BROADWAY STE 2300

City: DENVER State: CO Zip: 80290

6. Contact Name: Scott Webb Phone: (303)390-4095 Fax: (303)390-4960

Email: scottw@whiting.com

7. Well Name: WRD Well Number: 23-33

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

9. Proposed Total Measured Depth: 14861

WELL LOCATION INFORMATION

10. QtrQtr: NESW Sec: 33 Twp: 2N Rng: 97W Meridian: 6

Latitude: 40.096558 Longitude: -108.284692

 Footage at Surface: 1927 FNL/FSL 2237 FEL/FWL
 FSL FWL

11. Field Name: White River Field Number: 92800

12. Ground Elevation: 6169 13. County: RIO BLANCO

14. GPS Data:

Date of Measurement: 07/30/2010 PDOP Reading: 2.9 Instrument Operator's Name: B.H.

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

Footage at Top of Prod Zone: FNL/FSL FEL/FWL Bottom Hole: FNL/FSL FEL/FWL

Sec: Twp: Rng: Sec: Twp: Rng:

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: 509 ft

18. Distance to nearest property line: 1927 ft 19. Distance to nearest well permitted/completed in the same formation: 1500 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.)
Weber	WEBR	Statewide	160	SW/4

21. Mineral Ownership: ☐ Fee ☐ State ☒ Federal ☐ Indian Lease #: C45291

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):
All Section 32 and W/2; SWNE/4 and NESE/4 of Section 33-T2N-R97W, 6th P.M.

25. Distance to Nearest Mineral Lease Line: 1927 ft 26. Total Acres in Lease: 1160

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	17+1/2	13+3/8	54.5	500	355	500	
1ST	12+1/4	9+5/8	40	3,900	730	3,900	
2ND	8+3/4	7+0/0	29	12,380	978	112,380	3,600
1ST LINER	6+0/0	4+1/2	11.6	12,380	200	14,861	12,230

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

33. Comments _____

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: Scott M. Webb

Title: Regulatory Coordinator Date: 8/23/2010 Email: scottw@whiting.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

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
400086764	FORM 2 SUBMITTED	400086764.pdf
400086808	DRILLING PLAN	WRD 23-33 Drill Plan.pdf
400086809	SURFACE PLAN	WRD 23-33 SUPO.pdf
400090169	WELL LOCATION PLAT	WRD 23-33 Location Plat 8-9-10.pdf

Total Attach: 4 Files

BMP

<u>Type</u>	<u>Comment</u>
Drilling/Completion Operations	Surface Use Plan of operations is attached.

Total: 1 comment(s)