

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

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:

400085401

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: DeAnne Spector Phone: (720)876-5826 Fax: (720)876-6826Email: deanne.spector@encana.com7. Well Name: Benjamin Fee Well Number: 28-9B (K28NW)8. Unit Name (if appl): Grass Mesa Unit Number: COC056608
X9. Proposed Total Measured Depth: 10181

WELL LOCATION INFORMATION

10. QtrQtr: NESW Sec: 28 Twp: 6S Rng: 93W Meridian: 6Latitude: 39.494710 Longitude: -107.780409Footage at Surface: 1741 FNL/FSL FSL 2545 FEL/FWL FWL11. Field Name: Mamm Creek Field Number: 5250012. Ground Elevation: 5952 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 06/11/2010 PDOP Reading: 2.8 Instrument Operator's Name: C.D. Slaugh15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**Footage at Top of Prod Zone: FNL/FSL 2170 FSL 1290 FEL/FWL FEL Bottom Hole: FNL/FSL 2170 FSL 1290 FEL/FWL FEL
Sec: 28 Twp: 6S Rng: 93W Sec: 28 Twp: 6S 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: 550 ft18. Distance to nearest property line: 417 19. Distance to nearest well permitted/completed in the same formation: 420 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):
 T6S-R96W: Sec. 21: S2, S2NE; Sec. 28: E2E2, SWSE, NWNE; Sec. 33: E2SW

25. Distance to Nearest Mineral Lease Line: 48 ft 26. Total Acres in Lease: 720

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+0/0	16+0/0	65	40	5	40	0
SURF	12+1/4	9+5/8	36	1,527	468	1,527	0
1ST	7+7/8	4+1/2	11.6	10,181	797	10,181	0

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

33. Comments Distance from well to the public road is 550'. Blanket waiver letter is included with this permit. Intermediate casing will be 200>MSVD; TOC will be 500' inside the intermediate casing.

34. Location ID: 335428

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: DeAnne Spector

Title: Regulatory Analyst Date: _____ Email: deanne.spector@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	Permit Number: _____	Expiration Date: _____
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
400085419	PLAT	Benjamin Fee 28-9B Plat (K28NW).pdf
400085421	SURFACE AGRMT/SURETY	K28NW SDA.pdf
400085422	DEVIATED DRILLING PLAN	EnCana MC (K28NW) Benjamin Fee 28-9B Plan #1.pdf
400090786	WAIVERS	Petrogulf - Blanket Waiver.pdf

Total Attach: 4 Files