

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:
400085423

Plugging Bond Surety
201100017

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: 100185

5. Address: 370 17TH ST STE 1700
City: DENVER State: CO Zip: 80202-5632

6. Contact Name: DeAnne Spector Phone: (720)876-5826 Fax: (720)876-6826
Email: deanne.spector@encana.com

7. Well Name: Benjamin Fee Well Number: 28-10D2 (K28NW)

8. Unit Name (if appl): Grass Mesa Unit Number: COC056608
X

9. Proposed Total Measured Depth: 10096

WELL LOCATION INFORMATION

10. QtrQtr: NESW Sec: 28 Twp: 6S Rng: 93W Meridian: 6
Latitude: 39.494664 Longitude: -107.780409

Footage at Surface: 1724 ^{FNL/FSL} FSL 2545 ^{FEL/FWL} FWL

11. Field Name: Mamm Creek Field Number: 52500

12. Ground Elevation: 5953 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 06/11/2010 PDOP Reading: 2.8 Instrument Operator's Name: C.D. Slaugh

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

Footage at Top of Prod Zone: ^{FNL/FSL} 1650 ^{FEL/FWL} FSL 1530 ^{FEL} FEL Bottom Hole: ^{FNL/FSL} 1650 ^{FEL/FWL} FSL 1530 ^{FEL} FEL
 Sec: 28 Twp: 6S Rng: 93W Sec: 28 Twp: 6S Rng: 93W

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: 550 ft

18. Distance to nearest property line: 400 ft 19. Distance to nearest well permitted/completed in the same formation: 385 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-R93W: Sec. 28: SWNE, NWSE, NESW, SENW

25. Distance to Nearest Mineral Lease Line: 192 ft 26. Total Acres in Lease: 160

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	1,514	464	1,514	0
1ST	7+7/8	4+1/2	11.6	10,096	797	10,096	0

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

33. Comments Distance from well to public road is 550'. Blanket waiver is included with this permit. Intermediate casing will be 200>MSVD; production 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
400085425	PLAT	Benjamin Fee 28-10D2 Plat (K28NW).pdf
400085426	DEVIATED DRILLING PLAN	Benjamin Fee 28-10D2 Drilling Plan #1.pdf
400085428	SURFACE AGRMT/SURETY	K28NW SDA.pdf
400090785	WAIVERS	Petrogulf - Blanket Waiver.pdf

Total Attach: 4 Files