

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:

400103074

Plugging Bond Surety

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: Federal Well Number: 28-12BB (PL28)

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

9. Proposed Total Measured Depth: 8057

WELL LOCATION INFORMATION

10. QtrQtr: NWSW Sec: 28 Twp: 7S Rng: 95W Meridian: 6

Latitude: 39.406930 Longitude: -108.008940

Footage at Surface: 2109 FNL/FSL FSL 751 FEL/FWL FWL

11. Field Name: Parachute Field Number: 67350

12. Ground Elevation: 7162 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 11/06/2009 PDOP Reading: 0.0 Instrument Operator's Name: Ted Taggart

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
2526 FSL 652 FWL 2526 FSL 652 FWL
Sec: 28 Twp: 7S Rng: 95W Sec: 28 Twp: 7S Rng: 95W16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No

17. Distance to the nearest building, public road, above ground utility or railroad: 5700 ft

18. Distance to nearest property line: 1851 ft 19. Distance to nearest well permitted/completed in the same formation: 450 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 #: COC011523

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-R95W; Sec. 19: Lots 5, 6. Sec. 20: SW, NWSE. Sec. 21: E/2, NESW. Sec. 22: Lots 2-5, 8-11. Sec. 27: Lots 2, 4, 5, S/2NE/SW, SWNW, W/2SW, SESW. Sec. 28: Lots 1, 2, S/2N/2, S/2. Sec. 29: Lots 1-4, S/2N/2, S/2. Sec. 30: Lot 3, SENE.

25. Distance to Nearest Mineral Lease Line: 1434 ft 26. Total Acres in Lease: 2536

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	1,200	386	1,200	0
1ST	7+7/8	4+1/2	11.6	8,057	661	8,057	0

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

33. Comments TOC will be 200>MSVD. CA COC0128382.

34. Location ID: 334071

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 05	Permit Number: _____ Expiration Date: _____
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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
400103147	PLAT	Plat.pdf
400103149	DEVIATED DRILLING PLAN	EnCana SP (PL 28) Federal 28-12BB Plan #1.pdf
400104882	FED. DRILLING PERMIT	Fed Permit.pdf

Total Attach: 3 Files