

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:

400104210

Plugging Bond Surety

20090078

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: PETROLEUM DEVELOPMENT CORPORATION 4. COGCC Operator Number: 69175

5. Address: 1775 SHERMAN STREET - STE 3000
City: DENVER State: CO Zip: 80203

6. Contact Name: Kelly Huffman Phone: (303)831-3974 Fax: (303)860-5838
Email: khuffman@petd.com

7. Well Name: Simonsen Well Number: 21-12D

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

9. Proposed Total Measured Depth: 7580

WELL LOCATION INFORMATION

10. QtrQtr: NENW Sec: 12 Twp: 6N Rng: 67W Meridian: 6

Latitude: 40.505910 Longitude: -104.846320

Footage at Surface: 1107 FNL/FSL FNL 1362 FEL/FWL FWL

11. Field Name: Severance Field Number: 77030

12. Ground Elevation: 4864 13. County: WELD

14. GPS Data:

Date of Measurement: 10/13/2010 PDOP Reading: 1.1 Instrument Operator's Name: Brian T. Brinkman

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

Footage at Top of Prod Zone: FNL/FSL 660 FNL 1977 FWL FWL Bottom Hole: FNL/FSL 660 FNL 1977 FWL FWL
Sec: 12 Twp: 6N Rng: 67W Sec: 12 Twp: 6N Rng: 67W

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: 1050 ft

18. Distance to nearest property line: 1107 ft 19. Distance to nearest well permitted/completed in the same formation: 760 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.)
Niobrara Codell	NB-CD	407-87	80	E/2NW/4
Sussex Shannon	SX-SN	n/a	80	E/2NW/4

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):
Township 6 North, Range 67 West of the 6th PM, Section 12: NW/4 (and lands in other sections)

25. Distance to Nearest Mineral Lease Line: 660 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
SURF	12+1/4	8+5/8	24	650	500	650	0
1ST	7+7/8	4+1/2	10.5	7,580	525	7,580	0

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

33. Comments Conductor casing will not be used. The Simonsen 11-12D, 21-12D, 12A, 12-12D and 22-12D will all be drilled from the same pad. The wells will be tied into a new tank battery facility approximately 1000' to the north of the drill pad.

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: Kelly Huffman

Title: Permit Specialist Date: _____ Email: khuffman@petd.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
400104235	PLAT	SIMONSEN 21-12D (10-18-10).pdf
400105065	DEVIATED DRILLING PLAN	Simonsen 21-12D Deviated Drilling Plan.pdf
400105066	30 DAY NOTICE LETTER	Simonsen Notice Letter Sec 12.pdf

Total Attach: 3 Files