

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:
400117124
Plugging Bond Surety
20100017

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: Heather Mitchell Phone: (720)876-3070 Fax: (720)876-4070
Email: heather.mitchell@encana.com

7. Well Name: N. Parachute Well Number: DH14A-4 H17 696

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

9. Proposed Total Measured Depth: 19486

WELL LOCATION INFORMATION

10. QtrQtr: 7 Sec: 17 Twp: 6S Rng: 96W Meridian: 6
Latitude: 39.527617 Longitude: -108.123483

Footage at Surface: 1473 feet ^{FNL/FSL} FNL 294 feet ^{FEL/FWL} FEL

11. Field Name: Grand Valley Field Number: 31290

12. Ground Elevation: 5654 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 09/01/2010 PDOP Reading: 2.8 Instrument Operator's Name: Robert Kay

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

Footage at Top of Prod Zone: ^{FNL/FSL} 994 ^{FNL} FNL 663 ^{FWL} FWL ^{FEL/FWL} 215 ^{FSL} FSL 2507 ^{FWL} FWL
Sec: 16 Twp: 6S Rng: 96W Sec: 4 Twp: 6S Rng: 96W

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: 200 ft

18. Distance to nearest property line: 294 ft 19. Distance to nearest well permitted/completed in the same formation: 14026 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.)
Mancos	MNCS			

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):
Please see attached lease maps

25. Distance to Nearest Mineral Lease Line: 1200 ft 26. Total Acres in Lease: 25889

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: Recycle and bury

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	Wt/Ft	Csg/Line Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
CONDUCTOR	30	20	Line Pipe		120	319	120	0
SURF	14+3/4	10+3/4	45.5#		4,300	1,268	4,300	0
2ND	9+7/8	9+7/8	29.7#		10,400	709	10,400	3,800
3RD	6+1/2	5+1/2	23#		10,350	726	19,486	9,900

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

33. Comments Chevron owns the Surface and Encana owns the minerals. #17 is calculated to the nearest utility. Conductor and Surface casing will be run to surface. Production casing will be a tapered string. The size will be both 5 1/2" and 4 1/2" Casing.

34. Location ID: 335825

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: Heather Mitchell

Title: Regulatory Analyst Date: _____ Email: heather.mitchell@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.

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Attachment Check List

Att Doc Num	Name
400119353	PLAT
400119354	DEVIATED DRILLING PLAN
400119355	TOPO MAP
400119356	OTHER
400119357	LEASE MAP

Total Attach: 5 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
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Total: 0 comment(s)

BMP

<u>Type</u>	<u>Comment</u>
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Total: 0 comment(s)