

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:  
400120451  
Plugging Bond Surety

3. Name of Operator: WEXPRO COMPANY 4. COGCC Operator Number: 95960

5. Address: P O BOX 45003  
City: SALT LAKE CITY State: UT Zip: 84145-0601

6. Contact Name: DEE FINDLAY Phone: (307)352-7554 Fax: (307)352-7575  
Email: dee.findlay@questar.com

7. Well Name: POWDER WASH GOVERNMENT Well Number: 10

8. Unit Name (if appl): POWDER WASH Unit Number: COC  
047671A

9. Proposed Total Measured Depth: 9573

WELL LOCATION INFORMATION

10. QtrQtr: NESE Sec: 8 Twp: 11N Rng: 97W Meridian: 6  
Latitude: 40.926853 Longitude: -108.307542

Footage at Surface: 2305 feet FNL/FSL FSL 364 feet FEL/FWL FEL

11. Field Name: POWDER WASH Field Number: 69800

12. Ground Elevation: 6767 13. County: MOFFAT

14. GPS Data:

Date of Measurement: 07/21/2010 PDOP Reading: 2.5 Instrument Operator's Name: DAVID KAY

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

Footage at Top of Prod Zone: FNL/FSL 2413 FNL 848 FEL FEL Bottom Hole: FNL/FSL 2413 FNL 848 FEL FEL  
Sec: 8 Twp: 11N Rng: 97W Sec: 8 Twp: 11N Rng: 97W

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: 240 ft

18. Distance to nearest property line: 848 ft 19. Distance to nearest well permitted/completed in the same formation: 740 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.)
FORT UNION	FTUN			
WASATCH	WSTC			

21. Mineral Ownership:  Fee  State  Federal  Indian Lease #: COD054985

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):  
SEE ATTACHED MAP

25. Distance to Nearest Mineral Lease Line: 848 ft 26. Total Acres in Lease: 480

**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	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
CONDUCTOR	20	16	STEEL	0	80	8	80	0
SURF	12+1/4	9+5/8	36	0	1,500	535	1,500	0
1ST	7+7/8	4+1/2	13.5	0	9,573	1,428	9,573	0

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

33. Comments This well will be drilled directionally and there will be three additional well bores located on the pad to minimize surface disturbance. This pad is covered under the Master surface Use Plan, dated 01/01/2011.

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: G. T. NIMMO

Title: OPERATIONS MANAGER Date: \_\_\_\_\_ Email: dee.findlay@questar.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: \_\_\_\_\_

<b>API NUMBER</b> 05	Permit Number: _____ Expiration Date: _____
<b>CONDITIONS OF APPROVAL, IF ANY:</b> _____	

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
400120466	PLAT
400120467	LEASE MAP
400120475	TOPO MAP
400120493	DEVIATED DRILLING PLAN
400126973	FED. DRILLING PERMIT
400126974	FED. DRILLING PERMIT
400126980	FED. DRILLING PERMIT
400126983	DRILLING PLAN
400126984	DRILLING PLAN

Total Attach: 9 Files

**General Comments**

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)

**BMP**

<u>Type</u>	<u>Comment</u>

Total: 0 comment(s)