

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:

400142644

Plugging Bond Surety

20040083

3. Name of Operator: PIONEER NATURAL RESOURCES USA INC4. COGCC Operator Number: 100845. Address: 1401 17TH ST STE 1200City: DENVER State: CO Zip: 802026. Contact Name: Georgina Kovacik Phone: (303)675-2611 Fax: (303)294-1251Email: georgina.kovacik@pxd.com7. Well Name: WD FEDERAL Well Number: 14-7 R8. Unit Name (if appl): Spanish Peaks Unit Number: COC57890A9. Proposed Total Measured Depth: 1890

## WELL LOCATION INFORMATION

10. QtrQtr: SW/SW Sec: 7 Twp: 33S Rng: 65W Meridian: 6Latitude: 37.181530 Longitude: -104.721100
 Footage at Surface: 1029 feet FNL/FSL 311 feet FEL/FWL FWL
11. Field Name: Purgatoire River Field Number: 7083012. Ground Elevation: 7170 13. County: LAS ANIMAS

## 14. GPS Data:

Date of Measurement: 08/19/2010 PDOP Reading: 0.8 Instrument Operator's Name: R. Coberly15. 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 \_\_\_\_\_

Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_ Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_

16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 3325 ft18. Distance to nearest property line: 1851 ft 19. Distance to nearest well permitted/completed in the same formation: 1540 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.)
RATON/VERMEJO	RT/VJ	NA		NA

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):  
see attached

25. Distance to Nearest Mineral Lease Line: \_\_\_\_\_ 311 ft 26. Total Acres in Lease: \_\_\_\_\_ 471

### 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 28 or 29 are yes, is this location in a sensitive area (Rule 901.e)? ☐ Yes ☒ No

31. Mud disposal: ☐ Offsite ☒ Onsite **If 28, 29, or 30 are "Yes" a pit permit may be required.**

Method: ☐ Land Farming ☐ Land Spreading ☐ Disposal Facility Other: Drilling pit

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	12+3/4	12+3/4	33.38	0	6			
SURF	11	8+5/8	24	0	250	52	250	0
1ST	7+7/8	5+1/2	15.5	0	1,890	280	1,890	0

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

33. Comments The conductor casing will be hammered in.

34. Location ID: 309399

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: Georgina Kovacik

Title: Engineering Tech Date: \_\_\_\_\_ Email: georgina.kovacik@pxd.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: \_\_\_\_\_

05	API NUMBER	Permit Number: _____	Expiration Date: _____
	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
400142685	SURFACE AGRMT/SURETY
400142686	LEGAL/LEASE DESCRIPTION
400142688	CONSULT NOTICE
400142690	30 DAY NOTICE LETTER
400142692	WELL LOCATION PLAT

Total Attach: 5 Files

**General Comments**

User Group	Comment	Comment Date

Total: 0 comment(s)

**BMP**

Type	Comment

Total: 0 comment(s)