

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:

400144186

Plugging Bond Surety

20030110

3. Name of Operator: WHITING OIL AND GAS CORPORATION4. COGCC Operator Number: 961555. Address: 1700 BROADWAY STE 2300City: DENVER State: CO Zip: 802906. Contact Name: Scott Webb Phone: (303)390-4095 Fax: (303)495-6777Email: scottw@whiting.com7. Well Name: Chalk Bluffs Well Number: 36-13H

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

9. Proposed Total Measured Depth: 10148

## WELL LOCATION INFORMATION

10. QtrQtr: NWSW Sec: 36 Twp: 10N Rng: 60W Meridian: 6Latitude: 40.791140 Longitude: -104.046580
 Footage at Surface: 1780 feet FNL/FSL 660 feet FEL/FWL  
 FSL FWL

11. Field Name: \_\_\_\_\_ Field Number: \_\_\_\_\_

12. Ground Elevation: 5224 13. County: WELD

## 14. GPS Data:

Date of Measurement: 09/09/2010 PDOP Reading: 2.3 Instrument Operator's Name: Darren Veal15. If well is ☐ Directional ☒ Horizontal (highly deviated) **submit deviated drilling plan.**
 Footage at Top of Prod Zone: FNL/FSL 1719 FSL 872 FWL 660 Bottom Hole: FNL/FSL 660 FEL/FWL 660 FEL 660  
 Sec: 36 Twp: 10N Rng: 60W Sec: 36 Twp: 10N Rng: 60W
16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 3041 ft18. Distance to nearest property line: 660 ft 19. Distance to nearest well permitted/completed in the same formation: 5280 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	NBRR			

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): \_\_\_\_\_

25. Distance to Nearest Mineral Lease Line: \_\_\_\_\_ 660 ft \_\_\_\_\_ 26. Total Acres in Lease: \_\_\_\_\_ 640 \_\_\_\_\_

### 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

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
SURF	12+1/4	9+5/8	36	0	1,500	421	1,500	0
1ST	8+3/4	7	29	0	6,819	685	6,819	0
2ND LINER	6	4+1/2	11.6	8169	10,148			

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

33. Comments First lateral missed target zone, well will be plugged back and sidetracked as follows: Set 96 sx cement in lateral from 8563' to MDT of 9515'. KOP at 8169' MD/6675' TVD and sidetrack around plugged 1st lateral up to intended target zone. Drill out lateral at that interval to originally permitted BHL of 660' FSL and 660' FEL Secion 36-T10N-R60W.

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: Scott M. Webb

Title: Regulatory Coordinator Date: \_\_\_\_\_ Email: scottw@whiting.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: \_\_\_\_\_

Permit Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**API NUMBER**

05 123 32488 01

**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
400144191	

Total Attach: 1 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)