

**APPLICATION FOR PERMIT TO:**

1.  **Drill**,  Deepen,  Re-enter,  Recomplete and Operate

**2. TYPE OF WELL**

OIL  GAS  COALBED  OTHER \_\_\_\_\_  
 SINGLE ZONE  MULTIPLE  COMMINGLE

Refiling   
Sidetrack

Document Number:  
400149236  
Plugging Bond Surety  
20040060

3. Name of Operator: BARRETT CORPORATION\* BILL 4. COGCC Operator Number: 10071

5. Address: 1099 18TH ST STE 2300  
City: DENVER State: CO Zip: 80202

6. Contact Name: Mary Pobuda Phone: (303)312-8531 Fax: (303)291-0420  
Email: mpobuda@billbarrettcorp.com

7. Well Name: Miller Well Number: 13D-6-791

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

9. Proposed Total Measured Depth: 6824

**WELL LOCATION INFORMATION**

10. QtrQtr: Lot 4 Sec: 6 Twp: 7S Rng: 91W Meridian: 6  
Latitude: 39.475304 Longitude: -107.604534

Footage at Surface: 549 feet FNL/FSL FNL 381 feet FEL/FWL FWL

11. Field Name: Mamm Creek Field Number: 52500

12. Ground Elevation: 6094 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 07/08/2010 PDOP Reading: 6.0 Instrument Operator's Name: Jim Kalmon

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

Footage at Top of Prod Zone: FNL/FSL 459 FEL/FWL FNL 648 FEL/FWL FWL Bottom Hole: FNL/FSL 459 FEL/FWL FNL 648 FEL/FWL FWL  
 Sec: 6 Twp: 7S Rng: 91W Sec: 6 Twp: 7S Rng: 91W

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: 274 ft

18. Distance to nearest property line: 1127 ft 19. Distance to nearest well permitted/completed in the same formation: 309 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.)
Iles	ILES	191-10		
Williams Fork	WMFK	191-8		

21. Mineral Ownership:  Fee  State  Federal  Indian Lease #: CO10284

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 Bond  \$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 lease map

25. Distance to Nearest Mineral Lease Line: 420 ft 26. Total Acres in Lease: 857

### 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: Evap & 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/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
CONDUCTOR	24	14	36	0	40		40	0
SURF	12+1/4	9+5/8	36	0	681	220	681	0
1ST	7+7/8	4+1/2	11.6	0	6,824	780	6,824	2,380

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

33. Comments Miller pad #9. Conductor set with grout. 8 3/4" hole drilled to approximately 5000 feet, then 7 7/8" hole to TD. Surface casing 10% of TVD.

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: Mary Pobuda

Title: Permit Analyst Date: \_\_\_\_\_ Email: mpobuda@billbarrettcorp.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

05

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.

### Attachment Check List

Att Doc Num	Name
400151677	SURFACE AGRMT/SURETY
400165830	DEVIATED DRILLING PLAN
400165831	WELL LOCATION PLAT

Total Attach: 3 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)