

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:
400191374

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: JENNIFER LIND Phone: (720)876-5890 Fax: (720)876-6890
Email: JENNIFER.LIND@ENCANA.COM

7. Well Name: GRATTAN Well Number: 4A-30H

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

9. Proposed Total Measured Depth: 11574

WELL LOCATION INFORMATION

10. QtrQtr: SESE Sec: 30 Twp: 2N Rng: 64W Meridian: 6
Latitude: 40.103720 Longitude: -104.585910

Footage at Surface: 513 feet FNL/FSL FSL 464 feet FEL/FWL FEL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 4933 13. County: WELD

14. GPS Data:
Date of Measurement: 07/01/2011 PDOP Reading: 1.2 Instrument Operator's Name: WINANS

15. 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

574 FSL 522 FEL 460 FNL 752 FEL

Sec: 30 Twp: 2N Rng: 64W Sec: 30 Twp: 2N Rng: 64W

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: 282 ft

18. Distance to nearest property line: 464 ft 19. Distance to nearest well permitted/completed in the same formation: 438 ft

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	407	320	E/2

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#: 20090011

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 MAP (SINCE PRODUCTION WILL BE ESTABLISHED ON MORE THAN ONE LEASE, THE ACREAGES FOR THE LEASES HAVE BEEN ADDED TOGETHER FOR "TOTAL ACRES IN LEASE".)
 25. Distance to Nearest Mineral Lease Line: 460 ft 26. Total Acres in Lease: 320

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: _____
 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	22+1/1	16+1/1	30	0	80	80	80	0
SURF	12+1/4	9+5/8	40	0	800	198	800	0
1ST	8+3/4	7+1/1	26	0	7,359	899	7,359	500
2ND	6+1/8	4+1/2	13.5	0	11,574	373	11,574	7,059

32. BOP Equipment Type: Annular Preventer Double Ram Rotating Head None
 33. Comments CONDUCTOR CASING WILL BE UTILIZED. ENCANA REQUESTS THE APPROVAL OF THE OMISSION OF OPEN HOLE LOGS FOR THIS WELL. A CEMENT BOND LOGS WILL BE FURNISHED IN PLACE OF AN OPEN HOLE LOG. REQUEST LETTER ATTACHED.

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: JENNIFER LIND
 Title: REGULATORY ANALYST Date: 8/3/2011 Email: JENNIFER.LIND@ENCANA.

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: _____
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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
400191374	FORM 2 SUBMITTED
400191411	WELL LOCATION PLAT
400191412	OTHER
400191413	DEVIATED DRILLING PLAN
400191414	30 DAY NOTICE LETTER
400191622	PROPOSED SPACING UNIT
400192000	TOPO MAP
400192023	MINERAL LEASE MAP

Total Attach: 8 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>

Total: 0 comment(s)