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Document Number:
 400186503
 Plugging Bond Surety

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

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: Heather Mitchell Phone: (720)876-3070 Fax: (720)876-4070
 Email: heather.mitchell@encana.com
 7. Well Name: BHDU Well Number: DHN8B-1 A112100
 8. Unit Name (if appl): _____ Unit Number: _____
 9. Proposed Total Measured Depth: 15505

WELL LOCATION INFORMATION

10. QtrQtr: NENE Sec: 11 Twp: 2S Rng: 100W Meridian: 6
 Latitude: 39.894444 Longitude: -108.578703
 Footage at Surface: 1169 feet FNL/FSL FNL 1061 feet FEL/FWL FEL
 11. Field Name: Wildcat Field Number: 99999
 12. Ground Elevation: 7944 13. County: RIO BLANCO

14. GPS Data:
 Date of Measurement: 09/23/2010 PDOP Reading: 2.1 Instrument Operator's Name: Robert Kay

15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**
 Footage at Top of Prod Zone: FNL/FSL 480 FNL 769 FEL FEL Bottom Hole: FNL/FSL 1360 FNL 1100 FEL/FWL FWL
 Sec: 11 Twp: 2S Rng: 100 Sec: 1 Twp: 2S Rng: 100
W W

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: 4085 ft
 18. Distance to nearest property line: 1 mi 19. Distance to nearest well permitted/completed in the same formation: 8217 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.)
Mancos	MNCS			

21. Mineral Ownership: Fee State Federal Indian Lease #: COC-56840
 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):

T2S, R100W, Sec 1: Lots 6-10, S2N2, S2 and T2S, R100W, Sec: 2: Lots 5-7, 9, 10, S2N2, S2

25. Distance to Nearest Mineral Lease Line: 480 ft 26. Total Acres in Lease: 1341

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: Recycle and 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	30	20	Linepipe	0	120		120	0
SURF	17+1/2	10+3/4	40.5	0	2,500	1,378	2,500	0
2ND	9+7/8	7+5/8	26	0	8,000	715	8,000	
3RD	6+1/2	4+1/2	12	0	15,505	584	15,505	

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

33. Comments Distance in #17 is from the nearest above ground utilityShell owns the surface and the BLM owns the mineralsA Surface Use Agreement with Shell is currently being negotiatedConductor and surface casing cement will be run to surface2nd string will be cemented to 200' above TOG3rd string will be cemented into 2nd string

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: Heather Mitchell

Title: Regulatory Analyst Date: _____ Email: heather.mitchell@encana.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
400197097	WELL LOCATION PLAT
400197098	DEVIATED DRILLING PLAN

Total Attach: 2 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)