


FORM
2
Rev 06/09

State of Colorado
Oil and Gas Conservation Commission
1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)894-2100 Fax:(303)894-2109



DE	DET	DO	DES
Plugging Bond Surety ID#			

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

2. TYPE OF WELL
OIL ☐ GAS ☐ COALBED ☐ OTHER:
SINGLE ZONE ☐ MULTIPLE ZONES ☐ COMMINGLE ZONES ☐

Refiling ☐
Sidetrack ☐

3. Name of Operator:

4. COGCC Operator Number:

5. Address:
City: State: Zip:

6. Contact Name: Phone: Fax:

7. Well Name: Well Number:

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

9. Proposed Total Measured Depth:

Complete the Attachment Checklist

OP	COGCC
APD Orig & 1 Copy	
Form 2A	
Well location plat	
Topo map	
Mineral lease map	
Surface agrmt/Surety	
30 Day notice letter	
Deviated Drilling Plan	
Exception Location Request	
Exception Loc Waivers	
H2S Contingency Plan	
Federal Drilling Permit	

WELL LOCATION INFORMATION

10. QtrQtr: Sec: Twp: Rng: Meridian:
Latitude: Longitude:
Footage At Surface: FNL/FSL FEL/FWL

11. Field Name: Field Number:

12. Ground Elevation: 13. County:

14. GPS Data:
Date of Measurement: PDOP Reading: Instrument Operator's Name:

15. If well is: ☐ Directional ☐ Horizontal (highly deviated), **submit deviated drilling plan.** Bottomhole Sec Twp Rng:
Footage At Top of Prod Zone: FNL/FSL FEL/FWL At Bottom Hole: FNL/FSL FEL/FWL

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:

18. Distance to Nearest Property Line: 19. Distance to nearest well permitted/completed in the same formation:

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.)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

21. Mineral Ownership: ☐ Fee ☐ State ☐ Federal ☐ Indian

22. Surface Ownership: ☐ Fee ☐ State ☐ Federal ☐ Indian

23. Is the Surface Owner also the Mineral Owner? ☐ Yes ☐ No

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):

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

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 901e.)? ☐ Yes ☐ No **If 28, 29 or 30 are "Yes" a pit permit may be required.**

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.

String	Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bottom	Cement Top
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	Stage Tool	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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

33. Comments

34. Location ID:

35. Is this application in a Comprehensive Drilling Plan? ☐ Yes ☐ No If Yes enter CDP#

36. Is this application part of a submitted Oil and Gas Location Assessment? ☐ Yes ☐ No

Signed: Print Name:
Title: Date: Email:

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-

CONDITIONS OF APPROVAL, IF ANY: