

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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Document Number:

2588227

PluggingBond SuretyID

20010124

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: KERR-MCGEE OIL & GAS ONSHORE LP 4. COGCC Operator Number: 47120
5. Address: P O BOX 173779
- City: DENVER State: CO Zip: 80217-3779
6. Contact Name: CHERYL LIGHT Phone: (720)929-6461 Fax: (720)929-7461
- Email: DJREGULATORY@ANADARKO.COM
7. Well Name: OSTER Well Number: 24-15
8. Unit Name (if appl): _____ Unit Number: _____
9. Proposed Total Measured Depth: 7222

WELL LOCATION INFORMATION

10. QtrQtr: SESW Sec: 15 Twp: 4N Rng: 65W Meridian: 6
Latitude: 40.306558 Longitude: -104.651553

			FNL/FSL		FEL/FWL
Footage at Surface:	508	feet	FSL	1973	feet FWL

11. Field Name: WATTENBERG Field Number: 90750
12. Ground Elevation: 4751 13. County: WELD

- #### 14. GPS Data:

Date of Measurement: 02/24/2009 PDOP Reading: 2.8 Instrument Operator's Name: CODY MATTSON

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

Sec: Twp: Rng: Sec: Twp: Rng:

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: 530 ft

18. Distance to nearest property line: 508 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 1273 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.)
SUSSEX	SUSX	493	80	E/2SW4

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#: 20010125

- 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 OIL AND GAS LEASE DATED JANUARY 5, 1980

25. Distance to Nearest Mineral Lease Line: 508 ft

26. Total Acres in Lease: 240

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
SURF	12+1/4	8+5/8	24	0	425	290	425	0
1ST	7+7/8	4+1/2	11.6	0	7,241	270	7,241	5,350
			Stage Tool		4,600	260	4,600	3,560

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

33. Comments A FORM 2A IS NOT REQUIRED FOR THIS RECOMPLETION BECAUSE NO PIT WILL BE CONSTRUCTED AND THERE WILL BE NO ADDITIONAL SURFACE DISTURBANCE BEYOND THE ORIGINALLY DISTURBED AREA. RECOMPLETION FORM 4 DOC #2588225

34. Location ID: 329725

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: CHERYL LIGHT

Title: REGULATORY Date: 8/26/2011 Email: DJREGULATORY@

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: David S. Noshin

Director of COGCC Date: 9/21/2011

API NUMBER

05 123 17759 00

Permit Number: _____ Expiration Date: 9/20/2013

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.

1)Provide 48 hour notice of MIRU to Jim Precup via e-mail at jim.precup@state.co.us.
2)Within 30 days after recompleate, submit a Form 5A to document the new status of the formation in accordance with Rule 308B. If the casing pressure test indicates the need for remedial cement, provide a Form 5 with a CBL to document any remedial cement provided in accordance with Rule 308A (change of wellbore configuration).

Attachment Check List

Att Doc Num	Name
2481166	SURFACE CASING CHECK
2588227	FORM 2 SUBMITTED
2588228	OIL & GAS LEASE
2588229	30 DAY NOTICE LETTER

Total Attach: 4 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)