

**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:  
2588227  
PluggingBond SuretyID  
20010124

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

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

**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. Nashin                      Director of COGCC                      Date: 9/21/2011

<b>API NUMBER</b>
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 recomplete, 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**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>

Total: 0 comment(s)

**BMP**

<b><u>Type</u></b>	<b><u>Comment</u></b>

Total: 0 comment(s)