

**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:  
2588519

PluggingBond SuretyID  
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: DOWDY Well Number: 31-10

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

9. Proposed Total Measured Depth: 7919

**WELL LOCATION INFORMATION**

10. QtrQtr: NWNE Sec: 10 Twp: 2N Rng: 65W Meridian: 6  
Latitude: 40.158548 Longitude: -104.647366

Footage at Surface: 740 feet FNL 1900 feet FEL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 4854 13. County: WELD

14. GPS Data:  
Date of Measurement: 06/04/2009 PDOP Reading: 1.5 Instrument Operator's Name: LINDERHOLM

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: 1980 ft

18. Distance to nearest property line: 660 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 955 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.)
CODELL	CODL	407	320	E/2
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#: \_\_\_\_\_

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):

T2N-R65W-SEC 10: E/2

25. Distance to Nearest Mineral Lease Line: 740 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
SURF	12+1/4	8+5/8	24	0	906	327	906	0
1ST	7+7/8	4+1/2	11.6	0	7,918	850	7,918	4,166

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

33. Comments THIS RECOMPLETION DOES NOT REQUIRE A FORM 2A AS NO PITS WILL BE CONSTRUCTED AND THERE WILL BE NO ADDITIONAL SURFACE DISTURBANCE BEYOND THE ORIGINALLY DISTURBED AREA. RECOMPLETE FORM 4 DOC #2588517

34. Location ID: 331390

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 Date: 9/12/2011 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: David S. Neslin Director of COGCC Date: 10/12/2011

<b>API NUMBER</b>
05 123 20607 00

Permit Number: \_\_\_\_\_ Expiration Date: 10/11/2013

#### 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 24 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 both formations 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
2481196	SURFACE CASING CHECK
2588519	APD ORIGINAL

Total Attach: 2 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	No LGD or public comment received; final review completed.	10/11/2011 6:27:52 AM

Total: 1 comment(s)

### BMP

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

Total: 0 comment(s)