

FORM

2

Rev  
12/05

## 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:

400226676

PluggingBond SuretyID

19980020

## APPLICATION FOR PERMIT TO:

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

## 2. TYPE OF WELL

OIL ☒ GAS ☐ COALBED ☐ OTHER \_\_\_\_\_  
 SINGLE ZONE ☒ MULTIPLE ☐ COMMINGLE ☐

Refilling ☐Sidetrack ☐

3. Name of Operator: CHESAPEAKE OPERATING INC

4. COGCC Operator Number: 16660

5. Address: P O BOX 18496

City: OKLAHOMA CITY State: OK Zip: 73154-0496

6. Contact Name: Christy Keith Phone: (405)935-7539 Fax: (405)849-7539

Email: christy.keith@chk.com

7. Well Name: State 8-60 Well Number: 16-2H

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

9. Proposed Total Measured Depth: 10495

## WELL LOCATION INFORMATION

10. QtrQtr: NW NW Sec: 16 Twp: 8N Rng: 60W Meridian: 6

Latitude: 40.668813 Longitude: -104.103220

Footage at Surface: 280 feet FNL/FSL FNL 660 feet FEL/FWL  
 FNL FWL

11. Field Name: Wildcat Field Number: 99999

12. Ground Elevation: 4919 13. County: WELD

## 14. GPS Data:

Date of Measurement: 11/18/2011 PDOP Reading: 2.2 Instrument Operator's Name: ORME

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  
 854 FNL 661 FWL 600 FSL 660 FWL  
 Sec: 16 Twp: 8N Rng: 60W Sec: 16 Twp: 8N Rng: 60W

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: 4594 ft

18. Distance to nearest property line: 280 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 2689 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.)
NI0BRARA	NBRR	535-2	640	ALL

21. Mineral Ownership: ☐ Fee ☒ State ☐ Federal ☐ Indian Lease #: 8431.522. Surface Ownership: ☐ Fee ☒ State ☐ Federal ☐ Indian23. 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 ☐ No23b. 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):

ALL NWNW Sec. 16-8N-60W

25. Distance to Nearest Mineral Lease Line: 280 ft

26. Total Acres in Lease: 640

### 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: RELIABLE SERVICES

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	24	16		0	80		80	0
SURF	12+1/4	9+5/8	40#	0	1,100	352	1,100	0
1ST	8+3/4	5+1/2	17#	0	5,756	432	5,756	
1ST LINER	8+3/4	4+1/2	11.6#	5756	10,495	1,143	10,495	

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

33. Comments

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: CHRISTY KEITH

Title: REGULATORY COMP. ANALYST Date: \_\_\_\_\_ Email: CHRISTY.KEITH@CHK.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
400226678	DRILLING PLAN
400226679	DEVIATED DRILLING PLAN
400226680	WELL LOCATION PLAT

Total Attach: 3 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)