

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:
2285672
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: LIND Well Number: 2-6

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

9. Proposed Total Measured Depth: 7986

WELL LOCATION INFORMATION

10. QtrQtr: NWNE Sec: 6 Twp: 5N Rng: 67W Meridian: 6
Latitude: 40.435008 Longitude: -104.933944

Footage at Surface: 338 feet FNL 2458 feet FEL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 4954 13. County: WELD

14. GPS Data:

Date of Measurement: 11/23/2009 PDOP Reading: 2.1 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 _____
668 FNL 1986 FEL 672 FNL 1993 FEL
 Sec: 6 Twp: 5N Rng: 67W Sec: 6 Twp: 5N Rng: 67W

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: 225 ft

18. Distance to nearest property line: 269 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 3407 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.)
J SAND	JSND	232	320	N2

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):
 NE4 OF SECTION 6, EXCEPT THAT PART OF THE NE4 DESCRIBED AS LOT A OF RECORDED EXEMPTION NO. 0957-06-1 RE-1287 PER PLAT RECORDED AT RECEPTION NO. 2220899, T5N, R67W

25. Distance to Nearest Mineral Lease Line: 660 ft 26. Total Acres in Lease: 151

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	814	510	814	0
1ST	7+7/8	4+1/2	11.6	0	7,973	985	7,973	1,835

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. RECOMPLETE FORM 4 DOC #2285674

34. Location ID: 333267

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: 11/4/2011 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. Neslin* Director of COGCC Date: 11/29/2011

API NUMBER
05 123 26249 00

Permit Number: _____ Expiration Date: 11/28/2013

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.

Operator must meet water well testing requirements per Rule 318A.

Attachment Check List

Att Doc Num	Name
2285672	APD ORIGINAL
2285673	30 DAY NOTICE LETTER

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Final Review Completed. No LGD or public comment received.	11/29/2011 2:21:02 PM
Permit	Okay to pass pending public comment 11/28/11.	11/10/2011 2:41:51 PM

Total: 2 comment(s)

BMP

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

Total: 0 comment(s)