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Document Number:
400230032

PluggingBond SuretyID
20090078

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: PETROLEUM DEVELOPMENT CORPORATION 4. COGCC Operator Number: 69175
 5. Address: 1775 SHERMAN STREET - STE 3000
 City: DENVER State: CO Zip: 80203
 6. Contact Name: Jeff Glossa Phone: (303)831-3972 Fax: (303)860-5835
 Email: jglossa@petd.com
 7. Well Name: Waste Management Well Number: 12-26A
 8. Unit Name (if appl): _____ Unit Number: _____
 9. Proposed Total Measured Depth: 7600

WELL LOCATION INFORMATION

10. QtrQtr: SWNW Sec: 26 Twp: 3N Rng: 64W Meridian: 6
 Latitude: 40.199670 Longitude: -104.523720
 Footage at Surface: 1446 feet FNL 1205 feet FWL
 11. Field Name: Wattenberg Field Number: 90750
 12. Ground Elevation: 4850 13. County: WELD

14. GPS Data:
 Date of Measurement: 09/13/2007 PDOP Reading: 2.0 Instrument Operator's Name: Holly L. Tracy

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: 1000 ft
 18. Distance to nearest property line: 700 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 878 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	407-87	160	NW/4
Graneros	GRRS		160	NW/4
Greenhorn	GRNHN		160	NW/4
Niobrara	NBRR	407-87	160	NW/4

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#: 19990086

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):

480 acres including NW/4 S2 Sec 26 T3N R64W

25. Distance to Nearest Mineral Lease Line: 1205 ft 26. Total Acres in Lease: 2080

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	11	8+5/8	24	0	754	420	754	0
1ST	7+7/8	4+1/2	10.5	0	7,569	455	7,569	3,986

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

34. Location ID: 309673

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: Jeff Glossa

Title: Sr Engineering Tech Date: 12/7/2011 Email: jglossa@petd.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 Permit Number: _____ Expiration Date: _____

05 123 25206 00

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
400230032	FORM 2 SUBMITTED
400237240	WELLBORE DIAGRAM

Total Attach: 2 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)