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Document Number:
 400251726
 PluggingBond SuretyID

APPLICATION FOR PERMIT TO:

1. Drill, Deepen, Re-enter, **Recomplete and Operate**

2. TYPE OF WELL
 OIL GAS COALBED OTHER Injection
 SINGLE ZONE MULTIPLE COMMINGLE

Refiling
 Sidetrack

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: Julia Carter Phone: (720)876.5240 Fax: (720)876.6240
 Email: Julia.Carter@encana.com
 7. Well Name: SGU Well Number: 8506B F26 496
 8. Unit Name (if appl): Story Gulch Unit Number: COC69333X
 9. Proposed Total Measured Depth: 12740

WELL LOCATION INFORMATION

10. QtrQtr: SENW Sec: 26 Twp: 4S Rng: 96W Meridian: 6
 Latitude: 39.675797 Longitude: -108.138625
 Footage at Surface: 1740 feet FNL 1906 feet FWL
 11. Field Name: Wildcat Field Number: 99999
 12. Ground Elevation: 8238 13. County: GARFIELD

14. GPS Data:
 Date of Measurement: 02/12/2007 PDOP Reading: 1.6 Instrument Operator's Name: Ben Johnson

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: 1795 ft
 18. Distance to nearest property line: 3125 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 1240 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.)
Iles	ILES			
Wasatch	WSTC			
Williams Fork	WMFK			

21. Mineral Ownership: Fee State Federal Indian Lease #: COC64814
 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):

4S-96W, 6th P.M. Sec. 22, 23 & 24: ALL; Sec. 26: NW; Sec. 27: N2

25. Distance to Nearest Mineral Lease Line: 755 ft 26. Total Acres in Lease: 2425

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: Recycle & Bury

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	Line Pipe	0	140		140	
SURF	12+1/4	9+5/8	36#	0	3,941	910	3,990	1,568
1ST	7+7/8	4+1/2	11.6#	0	12,728	1,355	12,728	5,357

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

33. Comments Encana Oil & Gas (USA) Inc. owns surface. Encana would like to convert this well to an injection well. A sundry notice along with an injection application will also be filed. This is an existing location and no additional disturbance will occur.

34. Location ID: 335669

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: Julia M. Carter

Title: Regulatory Analyst Date: 2/14/2012 Email: Julia.Carter@encana.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
05 045 11293 00

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.

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Attachment Check List

Att Doc Num	Name
400251726	FORM 2 SUBMITTED
400251745	MINERAL LEASE MAP

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)