

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

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Date Received:

PluggingBond SuretyID

20040060

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: BARRETT CORPORATION* BILL 4. COGCC Operator Number: 10071

5. Address: 1099 18TH ST STE 2300
City: DENVER State: CO Zip: 80202

6. Contact Name: BRADY RILEY Phone: (303)312-8115 Fax: (303)291-0420
Email: BRILEY@BILLBARRETTCORP.COM

7. Well Name: Chappell Well Number: 15S-15-37-17

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

9. Proposed Total Measured Depth: 10409

WELL LOCATION INFORMATION

10. QtrQtr: SWSE Sec: 15 Twp: 37n Rng: 17w Meridian: N

Latitude: 37.457370

Longitude: -108.707920

			FNL/FSL			FEL/FWL
Footage at Surface:	300	feet	FSL	1980	feet	FEL

11. Field Name: WILDCAT Field Number: 99999

12. Ground Elevation: 6686 13. County: MONTEZUMA

- #### 14. GPS Data:

- Date of Measurement: 12/02/2009 PDOP Reading: 1.7 Instrument Operator's Name: T. BARBEE

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				
<u>610</u>		<u>FNL</u>		<u>1984</u>		<u>FEL</u>		<u>660</u>		<u>FSL</u>		<u>1980</u>		<u>FEL</u>	
Sec:	22	Twp:	37N	Rng:	17W	Sec:	22	Twp:	37N	Rng:	17W				

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: 310 ft

18. Distance to nearest property line: 300 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 1320 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.)
Gothic	gosh	statewide		

21. Mineral Ownership: ☐ Fee ☒ State ☐ Federal ☐ Indian Lease #: 75-8198-A

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):

E2, T37N-17W, Sec. 22

25. Distance to Nearest Mineral Lease Line: 657 ft

26. Total Acres in Lease: 360

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: EVAP & 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	26	16	65	0	80		80	0
SURF	12+1/4	9+5/8	36	0	2,000	760	2,000	0
1ST	8+3/4	7	26	0	5,968	800	5,968	0
1ST LINER	6+1/8	4+1/2	11.6	0	10,409	0	0	0

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

33. Comments This APD is being submitted to request an extension to the permit that expires 5/8/12. APD is updated with new casing and cementing program that was sundried (see attached). Nothing else has been changed since last reviewed/approved. Rule 305/306 consultations were waived.

34. Location ID: 417084

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: BRADY RILEY

Title: PERMIT ANALYST Date: _____ Email: BRILEY@BILLBARRETTCORP

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

05 083 06683 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.

Attachment Check List

Att Doc Num	Name
400261963	TOPO MAP
400261964	WELL LOCATION PLAT
400261965	SURFACE AGRMT/SURETY
400261966	DEVIATED DRILLING PLAN
400261967	OTHER

Total Attach: 5 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)

BMP

Type	Comment

Total: 0 comment(s)