

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



Document Number:

400264959

Date Received:

03/26/2012

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: RUTHANN MORSS Phone: (720)876-5060 Fax: (720)876-6060

Email: RUTHANN.MORSS@ENCANA.COM

7. Well Name: HMU Well Number: 11-9 (P11SW)

8. Unit Name (if appl): MIDDLETON CREEK Unit Number: COC68997

9. Proposed Total Measured Depth: 9555

WELL LOCATION INFORMATION

10. QtrQtr: SESE Sec: 11 Twp: 8S Rng: 93W Meridian: 6

Latitude: 39.371740 Longitude: -107.734080

Footage at Surface: 218 feet FNL/FSL FSL 568 feet FEL/FWL FEL

11. Field Name: MAMM CREEK Field Number: 52500

12. Ground Elevation: 7706 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 07/08/2008 PDOP Reading: 3.0 Instrument Operator's Name: JAY TAGGART

15. If well is  Directional  Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL 1916 FSL 715 FEL FEL Bottom Hole: FNL/FSL 2022 FSL 689 FEL FEL  
Sec: 11 Twp: 8S Rng: 93W Sec: 11 Twp: 8S Rng: 93W

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: 4500 ft

18. Distance to nearest property line: 206 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 2493 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.)
WASATCH	WSTC			

21. Mineral Ownership:  Fee  State  Federal  Indian Lease #: COC52260

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):

T8S-R93W SEC 11: TRACT 46 EXCEPT THE SOUTHWEST 40 ACRES

25. Distance to Nearest Mineral Lease Line: 660 ft 26. Total Acres in Lease: 280

### 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: no mud will be used

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	20	16	42	0	60	80	60	0
SURF	12+1/4	8+5/8	32	0	1,492	765	1,492	0
1ST	7+7/8	4+1/2	11.6	0	9,550	1,175	9,555	4,050

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

33. Comments THIS IS AN EXISTING WELL WHICH WE ARE PLANNING TO CONVERT TO INJECTION. THE PREP FOR INJECTION SUNDRY HAS BEEN SUBMITTED SEPARATELY.

34. Location ID: 334323

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: RUTHANN MORSS

Title: REGULATORY ANALYST Date: 3/26/2012 Email: RUTHANN.MORSS@ENCANA

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 10146 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
400264959	FORM 2 SUBMITTED

Total Attach: 1 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)