

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:

400259591

Date Received:

03/08/2012

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: SCOTT Well Number: 22C-36-692

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

9. Proposed Total Measured Depth: 7316

WELL LOCATION INFORMATION

10. QtrQtr: NWNE Sec: 36 Twp: 6S Rng: 92W Meridian: 6

Latitude: 39.488024 Longitude: -107.614646

Footage at Surface: 1137 feet FNL 2470 feet FEL

11. Field Name: MAMM CREEK Field Number: 52500

12. Ground Elevation: 5893.7 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 02/06/2012 PDOP Reading: 6.0 Instrument Operator's Name: JAMES A. KALMON

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 _____
1870 FNL 1983 FWL 1870 FNL 1983 FWL
Sec: 36 Twp: 6S Rng: 92W Sec: 36 Twp: 6S Rng: 92W

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: 1278 ft

18. Distance to nearest property line: 161 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 324 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.)
ILES	ILES	191-10	40	SE/4NW/4
WILLIAMS FORK	WMFK	191-8	40	SE/4NW/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#:

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):

SEE ATTACHED LEASE BOUNDARY MAP.

25. Distance to Nearest Mineral Lease Line: 556 ft

26. Total Acres in Lease: 857

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	42	0	40		40	0
SURF	12+1/4	9+5/8	36	0	710	230	710	0
1ST	8+3/4	4+1/2	11.6	0	7,316	780	7,316	2,898

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

33. Comments A NEW LOCATION ASSESSMENT (FORM 2A) HAS BEEN SUBMITTED FOR THIS WELL UNDER THE PENDING DOC #400258678 SCOTT 21A-32-692 (SCOTT 2-36 PAD). SEE ADDENDUM TO LOCATION PLAT (SHEET 2) FOR IMPROVEMENTS WITHIN 400'.

34. Location ID: 335153

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: 3/8/2012

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: 4/14/2012

API NUMBER

05 045 21466 00

Permit Number: _____

Expiration Date: 4/13/2014

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.

COMPLIANCE WITH THE MOST CURRENT REVISION OF THE NORTHWEST COLORADO NOTIFICATION POLICY IS REQUIRED.

GARFIELD COUNTY RULISON FIELD NOTICE TO OPERATORS. NOTE: ALL NOTICES SHALL BE GIVEN VIA E-MAIL. SEE ATTACHED NOTICE

NEW MAMM CREEK FIELD NOTICE TO OPERATORS APPLIES TO THIS WELL. NOTE: ALL NOTICES SHALL BE GIVEN VIA E-MAIL. SEE ATTACHED NOTICE

BRADEN HEAD TESTS-COMPLIANCE WITH THE NOTICE TO OPERATORS DRILLING WELLS IN THE BUZZARD, MAMM CREEK, AND RULISON FIELDS, GARFIELD COUNTY AND MESA COUNTY – PROCEDURES AND SUBMITTAL REQUIREMENTS FOR COMPLIANCE WITH COGCC ORDER NOS. 1-107, 139-56, 191-22, AND 369-2 (JULY 8, 2010) -- IS REQUIRED. SEE ATTACHED NOTICE.

CEMENT ON PRODUCTION CASING MUST BE A MINIMUM OF 200' ABOVE THE TOP OF THE MESA VERDE FORMATION (OR 200' ABOVE THE OHIO CREEK FORMATION IF PRESENT). CEMENT TOP VERIFY BY CBL IS REQUIRED. THIS REQUIREMENT SHALL SUPERSEDE THE TOP OF CEMENT REQUIREMENTS IN THE NEW MAMM CREEK FIELD NOTICE TO OPERATORS.

THE PROPOSED SURFACE CASING SHOULD BE MORE THAN 50' BELOW THE DEPTH OF THE DEEPEST WATER WELL WITHIN 1-MILE OF THE SURFACE LOCATION WHEN CORRECTED FOR ELEVATION DIFFERENCES. THE DEEPEST DEDICATED* WATER WELL WITHIN 1-MILE IS 495 FEET DEEP.

Attachment Check List

Att Doc Num	Name
400259591	FORM 2 SUBMITTED
400259593	MINERAL LEASE MAP
400259594	SURFACE AGRMT/SURETY
400259596	WELL LOCATION PLAT
400259597	DEVIATED DRILLING PLAN
400260847	DIRECTIONAL DATA

Total Attach: 6 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	changed zone type to "Multiple" and checked "Commingled". Changed unit acreage to "40" and unit designation to "SE/4NW/4" per spacing orders. Confirmed location does not exceed # of wells permitted in spacing unit. LGD passed; pub. comments waived. Final Review--passed.	4/13/2012 3:31:42 PM
LGD	Passed	3/19/2012 3:23:57 PM
Permit	Returned to draft at operators request.	3/13/2012 12:07:36 PM
Permit	Returned to draft at operators request.	3/9/2012 7:51:44 AM

Total: 4 comment(s)

BMP

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

Total: 0 comment(s)