FORM 2 Rev 12/05

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109

Document Number: 400314705

Date Received: 08/10/2012

PluggingBond SuretyID

APPLICATION FOR PERMIT TO:

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

2. TYPE OF WELL
OIL [X] GAS [ ] COALBED [ ] OTHER _____
SINGLE ZONE [ ] MULTIPLE [X] COMMINGLE [ ]

Refiling [X]
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: Bonnie Lamond Phone: (720)876-5156 Fax: (720)876-5156
Email: bonnie.lamond@encana.com

7. Well Name: Benjamin Federal Well Number: 28-12B2 (K28NW)

8. Unit Name (if appl): Grass Mesa Unit Number: COC056608 A

9. Proposed Total Measured Depth: 9378

WELL LOCATION INFORMATION

10. QtrQtr: NESW Sec: 28 Twp: 6S Rng: 93W Meridian: 6
Latitude: 39.494325 Longitude: -107.780438

		FNL/FSL		FEL/FWL
Footage at Surface:	1601 feet	FSL	2532 feet	FWL

11. Field Name: Mamm Creek Field Number: 52500

12. Ground Elevation: 5953 13. County: GARFIELD

14. GPS Data:
Date of Measurement: 06/11/2012 PDOP Reading: 2.8 Instrument Operator's Name: C.D. Slaugh

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

Footage at Top of Prod Zone:	FNL/FSL		FEL/FWL		Bottom Hole:	FNL/FSL		FEL/FWL	
	2000	FSL	240	FWL		2000	FSL	240	FWL
Sec:	28	Twp:	6S	Rng: 93W	Sec:	28	Twp:	6S	Rng: 93W

16. Is location in a high density area? (Rule 603b)? [ ] Yes [X] No

17. Distance to the nearest building, public road, above ground utility or railroad: 550 ft

18. Distance to nearest property line: 392 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 345 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			
Williams Fork	WMFK			

21. Mineral Ownership: [ ] Fee [ ] State [X] Federal [ ] Indian Lease #: COC054737

22. Surface Ownership: [X] Fee [ ] State [ ] Federal [ ] Indian

23. Is the Surface Owner also the Mineral Owner? [ ] Yes [X] 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):

T6S-R93W: Sec 28: W2W2

25. Distance to Nearest Mineral Lease Line: 240 ft 26. Total Acres in Lease: 160

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
CONDUCTOR	24	16	linepipe	0	40	5	40	0
SURF	12+1/4	9+5/8	36	0	1,406	435	1,406	0
1ST	7+7/8	4+1/2	11.6	0	9,378	820	9,378	0

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

33. Comments Distance from well is 550'. Intermediate casing will be 200'>MSVD; production TOC will be 500' or more

34. Location ID: 335428

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: Bonnie Lamond

Title: Permitting Technician Date: 8/10/2012 Email: bonnie.lamond@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 20181 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
400314705	FORM 2 SUBMITTED

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)

BMP

Type	Comment

Total: 0 comment(s)