

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:

400315681

Date Received:

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

PluggingBond SuretyID

20030028

3. Name of Operator: SWEPI LP

4. COGCC Operator Number: 78110

5. Address: 4582 S ULSTER ST PKWY #1400

City: DENVER State: CO Zip: 80237

6. Contact Name: Nancy Feck Phone: (307)367-7934 Fax: (307)367-4285

Email: N.Feck@shell.com

7. Well Name: Iles Mountain Well Number: 1-36

8. Unit Name (if appl): Williams Fork Unit Number: COC74956X

9. Proposed Total Measured Depth: 5248

WELL LOCATION INFORMATION

10. QtrQtr: NWSE Sec: 36 Twp: 5N Rng: 92W Meridian: 6

Latitude: 40.339450 Longitude: -107.666264

Footage at Surface: 2336 feet FSL 2146 feet FEL

11. Field Name: Wildcat Field Number: 99999

12. Ground Elevation: 6536 13. County: MOFFAT

14. GPS Data:

Date of Measurement: 03/02/2011 PDOP Reading: 1.1 Instrument Operator's Name: Andy Floyd

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

Footage at Top of Prod Zone: 2410 FSL 2004 FEL Bottom Hole: 1754 FNL 19 FEL
Sec: 36 Twp: 5N Rng: 92W Sec: 36 Twp: 5N 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: 305 ft

18. Distance to nearest property line: 2146 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 6685 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.)
Niobrara Shale	NBRR			

21. Mineral Ownership: Fee State Federal Indian Lease #: CO8475.5

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):

Section 36, T5N, R92W Please see map attached. Distance to nearest unit boundary is 1824'.

25. Distance to Nearest Mineral Lease Line: 0 26. Total Acres in Lease: 649

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	30	20		0	90		90	0
SURF	13+1/2	10+3/4	40.5	0	800	439	800	0
1ST	7+7/8	5+1/2	17	0	5,248	47	2,781	2,281

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

33. Comments Depending on subsurface conditions a contingency well design is included with 9 7/8" intermediate hole with 7 5/8" intermediate casing from surface to 2781'MD, cemented with 60 sacks of cement from 2781' to 2281'. Uncemented production liner would run from 2581'MD to TD at 5248'MD. Item #25. 1824' is the distance to the nearest Unit boundary.

34. Location ID: _____

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: Nancy Feck

Title: Regulatory Technician Date: _____ Email: N.Feck@shell.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

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.

Data retrieval failed for the subreport 'IntPolicy_NTO' located at: W:\Intrpub\Net\Reports\policy_nto.rdl. Please check th

Attachment Check List

Att Doc Num	Name
400328701	DEVIATED DRILLING PLAN
400328705	WELLBORE DIAGRAM
400328730	MINERAL LEASE MAP
400328734	LEGAL/LEASE DESCRIPTION
400328741	ACCESS ROAD MAP
400328743	WELL LOCATION PLAT
400330309	DRILLING PLAN
400330310	PROPOSED BMPs
400355548	DIRECTIONAL DATA

Total Attach: 9 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)