

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:

400369673

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

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: JENNIFER LIND Phone: (720)876-5890 Fax: (720)876-6890

Email: JENNIFER.LIND@ENCANA.COM

7. Well Name: SG Well Number: 8514E-34 E34496

8. Unit Name (if appl): BIG JIMMY UNIT Unit Number: COC74105X

9. Proposed Total Measured Depth: 12871

WELL LOCATION INFORMATION

10. QtrQtr: SWNW Sec: 34 Twp: 4S Rng: 96W Meridian: 6

Latitude: 39.659569 Longitude: -108.160669

Footage at Surface: 2367 feet FNL 974 feet FWL

11. Field Name: GRAND VALLEY Field Number: 31290

12. Ground Elevation: 8324 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 06/01/2012 PDOP Reading: 1.3 Instrument Operator's Name: REOBRT KAY

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

Footage at Top of Prod Zone: 196 FSL 1342 FWL Bottom Hole: 196 FSL 1342 FWL
Sec: 34 Twp: 4S Rng: 96W Sec: 34 Twp: 4S Rng: 96W

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: 3 mi

18. Distance to nearest property line: 2517 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 264 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.)
WILLIAMS FORK	WMFK			

21. Mineral Ownership: Fee State Federal Indian Lease #: COC69557

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):

PLEASE SEE ATTACHED MAP

25. Distance to Nearest Mineral Lease Line: 196 ft 26. Total Acres in Lease: 818

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: RECYCLE AND 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	20	LINE PIPE	0	120	176	120	0
SURF	12+1/4	9+5/8	36	0	2,500	782	2,500	0
1ST	7+7/8	4+1/2	11.6	0	12,871	1,391	12,871	7,871

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

33. Comments PLEASE NOTE THAT ENCANA OIL & GAS (USA) INC. IS THE SURFACE OWNER FOR THIS LOCATION. #17 IS CALCULATED FROM NEAREST BUILDING. SURFACE CASING HOLE SIZE WILL BE 14-3/4", 12-1/4" OR 13-1/2". CONDUCTOR CASING WILL BE CEMENTED TO SURFACE.

34. Location ID: 335928

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: JENNIFER LIND

Title: REGULATORY ANALYST Date: _____ Email: JENNIFER.LIND@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

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.

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Attachment Check List

Att Doc Num	Name
400369692	TOPO MAP
400369695	MINERAL LEASE MAP
400369696	DEVIATED DRILLING PLAN
400369697	WELL LOCATION PLAT
400369698	FED. DRILLING PERMIT
400369702	DIRECTIONAL DATA

Total Attach: 6 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)