

FORM
2

Rev
12/05

State of Colorado Oil and Gas Conservation Commission

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Document Number:

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Date Received:

06/19/2013

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: Venessa Langmacher Phone: (303)312-8172 Fax: (303)291-0420

Email: vlangmacher@billbarrettcorp.com

7. Well Name: Merritt Well Number: 6-66-9-0560BH

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

9. Proposed Total Measured Depth: 11671

WELL LOCATION INFORMATION

10. QtrQtr: NWNE Sec: 9 Twp: 6N Rng: 66W Meridian: 6

Latitude: 40.509320 Longitude: -104.781190

Footage at Surface: 260 feet FNL/FSL FNL 2155 feet FEL/FWL FEL

11. Field Name: Eaton Field Number: 19350

12. Ground Elevation: 4822 13. County: WELD

14. GPS Data:

Date of Measurement: 05/15/2013 PDOP Reading: 2.1 Instrument Operator's Name: Wyatt Hall

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

Footage at Top of Prod Zone: FNL/FSL 550 FNL 2510 FEL 500 FSL 2510 FEL
Bottom Hole: FNL/FSL 500 FSL 2510 FEL
Sec: 9 Twp: 6N Rng: 66W Sec: 9 Twp: 6N Rng: 66W

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: 249 ft

18. Distance to nearest property line: 260 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 150 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	NBRR	407-780	640	All

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 lease map attached.

25. Distance to Nearest Mineral Lease Line: 500 ft 26. Total Acres in Lease: 480

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	20	16	65	0	60	50	60	0
SURF	13+1/2	9+5/8	36	0	800	430	800	0
1ST	8+3/4	7	26	0	7,455	620	7,455	600
1ST LINER	6+1/8	4+1/2	11.6	6700	11,671			

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

33. Comments This well is an exception location to Rules 318Aa and 318Ac.

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: Venessa Langmacher

Title: Sr Permit Analyst Date: 6/19/2013 Email: vlangmacher@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: _____

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_NTC' located at: W:\Inetpub\NetReports\policy_ntc.rdl. Please check th

Attachment Check List

Att Doc Num	Name
400436358	FORM 2 SUBMITTED
400436365	DIRECTIONAL DATA
400436367	DEVIATED DRILLING PLAN
400436369	EXCEPTION LOC WAIVERS
400436370	OFFSET WELL EVALUATION
400436371	EXCEPTION LOC REQUEST
400436373	LEASE MAP
400436376	PLAT
400436920	SURFACE AGRMT/SURETY

Total Attach: 9 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Returned to draft; SUA does not have operator signature on it.	6/20/2013 9:53:53 AM

Total: 1 comment(s)

BMP

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

Total: 0 comment(s)