

FORM  
2A

Rev  
04/01

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:

1690305

Date Received:

05/20/2009

Oil and Gas Location Assessment

☐ New Location

☒ Amend Existing Location Location#: 330804

Submit original plus one copy. This form is to be submitted to the COGCC prior to any ground disturbance activity associated with oil and gas development operations. This Assessment may be approved as a standalone application or submitted as an informational report accompanying an Application for Permit-To-Drill, Form 2. Approval of this Assessment will allow for the construction of the below specified location; however, it does not supersede any land use rules applied by the local land use authority. This form may serve as notice to land owners and other interested parties, please see the COGCC web site at <http://colorado.gov/cogcc/> for all accompanying information pertinent to this Oil and Gas Location Assessment.

Location ID:

**330804**

Expiration Date:

**09/09/2012**

☒ This location assessment is included as part of a permit application.

1. CONSULTATION

- ☐ This location is included in a Comprehensive Drilling Plan. CDP # \_\_\_\_\_
- ☐ This location is in a sensitive wildlife habitat area.
- ☐ This location is in a wildlife restricted surface occupancy area.
- ☐ This location includes a Rule 306.d.(1)A.ii. variance request.

2. Operator

Operator Number: 100185

Name: ENCANA OIL & GAS (USA) INC

Address: 370 17TH ST STE 1700

City: DENVER State: CO Zip: 80202-5632

3. Contact Information

Name: NICK CURRAN

Phone: (720) 876-5288

Fax: (720) 876-6288

email: NICK.CURRAN@ENCANA.COM

4. Location Identification:

Name: SULLIVAN Number: 4-6-26

County: WELD

QuarterQuarter: SWSE Section: 26 Township: 2N Range: 68W Meridian: 6 Ground Elevation: 4942

Define a single point as a location reference for the facility location. This point should be used as the point of measurement in the drawings to be submitted with this application. When the location is to be used as a well site then the point shall be a well location.

Footage at surface: 580 feet FSL, from North or South section line, and 2338 feet FEL, from East or West section line.

Latitude: 40.103870 Longitude: -104.969330 PDOP Reading: 0.6 Date of Measurement: 03/17/2009

Instrument Operator's Name: TOM WINANS

5. Facilities (Indicate the number of each type of oil and gas facility planned on location):

|  |   |  |   |  |
|--|---|--|---|--|
| Special Purpose Pits: <input type="checkbox"/>       | Drilling Pits: <input type="text" value="1"/> | Wells: <input type="text" value="2"/>      | Production Pits: <input type="checkbox"/> | Dehydrator Units: <input type="checkbox"/> |
| Condensate Tanks: <input type="checkbox"/>           | Water Tanks: <input type="text" value="1"/>   | Separators: <input type="text" value="2"/> | Electric Motors: <input type="checkbox"/> | Multi-Well Pits: <input type="checkbox"/>  |
| Gas or Diesel Motors: <input type="text" value="7"/> | Cavity Pumps: <input type="checkbox"/>        | LACT Unit: <input type="checkbox"/>        | Pump Jacks: <input type="checkbox"/>      | Pigging Station: <input type="checkbox"/>  |
| Electric Generators: <input type="text" value="2"/>  | Gas Pipeline: <input type="text" value="1"/>  | Oil Pipeline: <input type="checkbox"/>     | Water Pipeline: <input type="checkbox"/>  | Flare: <input type="checkbox"/>            |
| Gas Compressors: <input type="checkbox"/>            | VOC Combustor: <input type="text" value="1"/> | Oil Tanks: <input type="text" value="1"/>  | Fuel Tanks: <input type="checkbox"/>      |  |

Other: 1 VAPOR RECOVERY UNIT AS WELL. EXISTING: 1 WELL, 1 WATER TANK, 1 OIL TANK, 1 SEPARATOR

6. Construction:

Date planned to commence construction: 04/01/2010 Size of disturbed area during construction in acres: 3.00  
Estimated date that interim reclamation will begin: 10/01/2010 Size of location after interim reclamation in acres: 1.00  
Estimated post-construction ground elevation: 4943 Will a closed loop system be used for drilling fluids: Yes ☐  
Will salt sections be encountered during drilling: Yes ☐ No ☒ Is H2S anticipated? Yes ☐ No ☒  
Will salt (>15,000 ppm TDS Cl) or oil based muds be used: Yes ☐ No ☒  
Mud disposal: Offsite ☒ Onsite ☐ Method: Land Farming ☐ Land Spreading ☒ Disposal Facility ☐  
Other: \_\_\_\_\_

## 7. Surface Owner:

Name: DOUG MCDONALD Phone: \_\_\_\_\_  
Address: 7247 E. COUNTY LINE RD Fax: \_\_\_\_\_  
Address: \_\_\_\_\_ Email: \_\_\_\_\_  
City: LONGMONT State: CO Zip: 80501 Date of Rule 306 surface owner consultation: 03/17/2009  
Surface Owner: ☒ Fee ☐ State ☐ Federal ☐ Indian  
Mineral Owner: ☒ Fee ☐ State ☐ Federal ☐ Indian  
The surface owner is: ☐ the mineral owner ☒ committed to an oil and gas lease  
☐ is the executer of the oil and gas lease ☐ the applicant  
The right to construct the location is granted by: ☐ oil and gas lease ☒ Surface Use Agreement ☐ Right of Way  
☐ applicant is owner  
Surface damage assurance if no agreement is in place: ☐ \$2000 ☐ \$5000 ☐ Blanket Surety ID \_\_\_\_\_

## 8. Reclamation Financial Assurance:

☒ Well Surety ID: 20050043 ☐ Gas Facility Surety ID: \_\_\_\_\_ ☐ Waste Mgmt. Surety ID: \_\_\_\_\_

## 9. Cultural:

Is the location in a high density area (Rule 603.b.): Yes ☐ No ☒  
Distance, in feet, to nearest building: 390, public road: 524, above ground utility: 501,  
railroad: 7334, property line: 181

## 10. Current Land Use (Check all that apply):

Crop Land: ☐ Irrigated ☒ Dry land ☐ Improved Pasture ☐ Hay Meadow ☐ CRP  
Non-Crop Land: ☐ Rangeland ☐ Timber ☐ Recreational ☐ Other (describe): \_\_\_\_\_  
Subdivided: ☐ Industrial ☐ Commercial ☐ Residential

## 11. Future Land Use (Check all that apply):

Crop Land: ☐ Irrigated ☒ Dry land ☐ Improved Pasture ☐ Hay Meadow ☐ CRP  
Non-Crop Land: ☐ Rangeland ☐ Timber ☐ Recreational ☐ Other (describe): \_\_\_\_\_  
Subdivided: ☐ Industrial ☐ Commercial ☐ Residential

## 12. Soils:

List all soil map units that occur within the proposed location. Attach the National Resource Conservation Service (NRCS) report showing the "Map Unit Description" report listing the soil typical vertical profile. This data is to be used when segregating topsoil.

The required information can be obtained from the NRCS web site at <http://soildatamart.nrcs.usda.gov/> or from the COGCC web site GIS Online map page found at <http://colorado.gov/cogcc>. Instructions are provided within the COGCC web site help section.

NRCS Map Unit Name: OLNEY FINE SANDY LOAM, 1 TO 3 PERCENT SLOPES

NRCS Map Unit Name: \_\_\_\_\_

NRCS Map Unit Name: \_\_\_\_\_

### 13. Plant Community:

Complete this section only if any portion of the disturbed area of the location's current land use is on non-crop land.

Are noxious weeds present: Yes ☐ No ☐

Plant species from: ☐ NRCS or, ☐ field observation Date of observation: \_\_\_\_\_

List individual species: \_\_\_\_\_

Check all plant communities that exist in the disturbed area.

- ☐ Disturbed Grassland (Cactus, Yucca, Cheatgrass, Rye)  
☐ Native Grassland (Bluestem, Grama, Wheatgrass, Buffalograss, Fescue, Oatgrass, Brome)  
☐ Shrub Land (Mahogany, Oak, Sage, Serviceberry, Chokecherry)  
☐ Plains Riparian (Cottonwood, Willow, Aspen, Maple, Poplar, Russian Olive, Tamarisk)  
☐ Mountain Riparian (Cottonwood, Willow, Blue Spruce)  
☐ Forest Land (Spruce, Fir, Ponderosa Pine, Lodgepole Pine, Juniper, Pinyon, Aspen)  
☐ Wetlands Aquatic (Bullrush, Sedge, Cattail, Arrowhead)  
☐ Alpine (above timberline)  
☐ Other (describe): \_\_\_\_\_

### 14. Water Resources:

Rule 901.e. may require a sensitive area determination be performed. If this determination is performed the data is to be submitted with the Form 2A.

Is this a sensitive area: ☒ No ☐ Yes Was a Rule 901.e. Sensitive Areas Determination performed: ☒ No ☐ Yes

Distance (in feet) to nearest surface water: 158 , water well: 2163 , depth to ground water: 45

Is the location in a riparian area: ☒ No ☐ Yes Was an Army Corps of Engineers Section 404 permit filed ☒ No ☐ Yes

Is the location within a Rule 317B Surface Water Supply Area buffer zone:

☒ No ☐ 0-300 ft. zone ☐ 301-500 ft. zone ☐ 501-2640 ft. zone

If the location is within a Rule 317B Surface Water Supply Area buffer have all public water supply systems within 15 miles been notified: ☐ No ☐ Yes

### 15. Comments:

TWINNING EXISTING 34-26 AND PROPOSED SULLIVAN 6-8-26

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.

Signed: \_\_\_\_\_ Date: 05/21/2009 Email: NICK.CURRAN@ENCANA.COM

Print Name: NICK CURRAN Title: PERMITTING AGENT

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: David S. Nashin Director of COGCC Date: 9/10/2009

**CONDITIONS OF  
APPROVAL, IF ANY:**

All representations, stipulations and conditions of approval stated in this Form 2A for this location shall constitute representations, stipulations and conditions of approval for any and all subsequent operations on the location unless this Form 2A is modified by Sundry Notice, Form 4 or an Amended Form 2A.

**Description**

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**Attachment Check List**

| <b><u>Att Doc Num</u></b> | <b><u>Name</u></b> |
|---------------------------|--------------------|
| 1690305                   | FORM 2A APPROVED   |
| 1690306                   | LOCATION PICTURES  |
| 1690307                   | LOCATION PICTURES  |
| 1690308                   | LOCATION DRAWING   |
| 1690309                   | HYDROLOGY MAP      |
| 1690310                   | ACCESS ROAD MAP    |
| 1690311                   | NRCS MAP UNIT DESC |
| 1690312                   | MULTI-WELL PLAN    |
| 1690313                   | PROPOSED BMPs      |
| 1813694                   | PROPOSED BMPs      |
| 1814209                   | CORRESPONDENCE     |
| 400004697                 | FORM 2A            |

Total Attach: 12 Files

**General Comments**

| <b><u>User Group</u></b> | <b><u>Comment</u></b> | <b><u>Comment Date</u></b> |
|--------------------------|-----------------------|----------------------------|
|                          |                       |                            |

Total: 0 comment(s)

**Best Management Practices**

| <b><u>No</u></b> | <b><u>BMP/COA Type</u></b> | <b><u>Description</u></b> |
|------------------|----------------------------|---------------------------|
|                  |                            |                           |