

FORM
2

Rev
05/22

State of Colorado

Energy & Carbon Management Commission

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



Document Number:

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(SUBMITTED)

Date Received:

04/05/2025

APPLICATION FOR PERMIT TO

Drill Deepen Re-enter Recomplete and Operate Amend

TYPE OF WELL OIL GAS COALBED OTHER: _____ Refile

ZONE TYPE SINGLE ZONE MULTIPLE ZONES COMMINGLE ZONES Sidetrack

Well Name: T-BONE Well Number: 22N-20-12

Name of Operator: EXTRACTION OIL & GAS INC ECMC Operator Number: 10459

Address: 555 17TH STREET SUITE 3700

City: DENVER State: CO Zip: 80202

Contact Name: JEFF ANNABLE Phone: (303)312-8529 Fax: ()

Email: DLRockiesPermitting@civiresources.com

FINANCIAL ASSURANCE FOR PLUGGING, ABANDONMENT, AND RECLAMATION

ECMC Financial Assurance

The Operator has provided or will provide Financial Assurance to the ECMC for this Well.

Surety ID Number (if applicable): 20240061

Federal Financial Assurance

In checking this box, the Operator certifies that it has provided or will provide at least this amount of Financial Assurance to the federal government for this Well. (Per Rule702.a.)

Amount of Federal Financial Assurance \$ _____

WELL LOCATION INFORMATION

Surface Location

QtrQtr: SESW Sec: 28 Twp: 5N Rng: 66W Meridian: 6

Footage at Surface: 594 Feet FSL 2334 Feet FWL

Latitude: 40.364889 Longitude: -104.785716

GPS Data: GPS Quality Value: 1.4 Type of GPS Quality Value: PDOP Date of Measurement: 12/18/2023

Ground Elevation: 4812

Field Name: WATTENBERG Field Number: 90750

Well Plan: is Directional Horizontal (highly deviated) Vertical

If Well plan is Directional or Horizontal attach Deviated Drilling Plan and Directional Data.

Subsurface Locations

Top of Productive Zone (TPZ)

Sec: 22 Twp: 5N Rng: 66W Footage at TPZ: 160 FSL 1976 FEL

Measured Depth of TPZ: 11319 True Vertical Depth of TPZ: 7000 FNL/FSL FEL/FWL

Base of Productive Zone (BPZ)

Sec: 10 Twp: 5N Rng: 66W Footage at BPZ: 350 FSL 1945 FEL
Measured Depth of BPZ: 22120 True Vertical Depth of BPZ: 7000 FNL/FSL FEL/FWL

Bottom Hole Location (BHL)

Sec: 10 Twp: 5N Rng: 66W Footage at BHL: 350 FSL 1945 FEL
FNL/FSL FEL/FWL

LOCAL GOVERNMENT PERMITTING INFORMATION

County: WELD Municipality: Milliken

Is the Surface Location of this Well in an area designated as one of State interest and subject to the requirements of § 24-65.1-108 C.R.S.? No

Per § 34-60-106(1)(f)(I)(A) C.R.S., the following questions pertain to the Relevant Local Government approval of the siting of the proposed Oil and Gas Location.

SB 19-181 provides that when "applying for a permit to drill," operators must include proof that they sought a local government siting permit and the disposition of that permit application, or that the local government does not have siting regulations. § 34-60-106(1)(f)(I) (A) C.R.S.

Does the Relevant Local Government regulate the siting of Oil and Gas Locations, with respect to this Location? [X] Yes [] No

[X] If yes, in checking this box, I hereby certify that an application has been filed with the local government with jurisdiction to approve the siting of the proposed oil and gas location.

The disposition of the application filed with the Relevant Local Government is: In Process Date of Final Disposition: 09/11/2024

Comments: Application in Process with Town of Milliken

SURFACE AND MINERAL OWNERSHIP AT WELL'S OIL & GAS LOCATION

Surface Owner of the land at this Well's Oil and Gas Location: [X] Fee [] State [] Federal [] Indian

Mineral Owner beneath this Well's Oil and Gas Location: [X] Fee [] State [] Federal [] Indian

Surface Owner Protection Bond (if applicable): Surety ID Number (if applicable):

MINERALS DEVELOPED BY WELL

The ownership of all the minerals that will be developed by this Well is (check all that apply):

- [X] Fee
[] State
[] Federal
[] Indian
[] N/A

LEASE INFORMATION

Using standard QtrQtr, Section, Township, Range format describe one entire mineral lease as follows:

* If this Well is within a unit, describe a lease that will be developed by the Well.
* If this Well is not subject to a unit, describe the lease that will be produced by the Well.
(Attach a Lease Map or Lease Description or Lease if necessary.)

Township 5 North Range 66 West
Section 22: W2NW4

Total Acres in Described Lease: 80 Described Mineral Lease is: [X] Fee [] State [] Federal [] Indian

Federal or State Lease #

SAFETY SETBACK INFORMATION

Distance from Well to nearest:

Building: 1192 Feet
 Building Unit: 1192 Feet
 Public Road: 291 Feet
 Above Ground Utility: 324 Feet
 Railroad: 4283 Feet
 Property Line: 306 Feet

INSTRUCTIONS:

- Specify all distances per Rule 308.b.(1).
- Enter 5280 for distance greater than 1 mile.
- Building - nearest building of any type. If nearest Building is a Building Unit, enter same distance for both.
- Building Unit – as defined in 100 Series Rules.

OBJECTIVE FORMATIONS

Objective Formation(s)	Formation Code	Spacing Order Number(s)	Unit Acreage Assigned to Well	Unit Configuration (N/2, SE/4, etc.)
NIOBRARA	NBRR	407-3696	1360	T5N R 66W: Sec 10: S2S2S2, Sec 15 & 22: All

Federal or State Unit Name (if appl): _____

Unit Number: _____

SUBSURFACE MINERAL SETBACKS

Enter 5280 for distance greater than 1 mile.

Is this Well within a unit? Yes

If YES:

Enter the minimum distance from the Completed Zone of this Well to the Unit Boundary: 160 Feet

Enter the minimum distance from the Completed Zone of this Well to the Completed Zone of an offset Well within the same unit permitted or completed in the same formation: 242 Feet

If NO:

Enter the minimum distance from the Completed Zone of this Well to the Lease Line of the described lease: _____ Feet

Enter the minimum distance from the Completed Zone of this Well to the Completed Zone of an offset Well producing from the same lease and permitted or completed in the same formation: _____ Feet

Exception Location

If this Well requires the approval of a Rule 401.c Exception Location, enter the Rule or spacing order number and attach the Exception Location Request and Waivers. _____

SPACING & FORMATIONS COMMENTS

DRILLING PROGRAMProposed Total Measured Depth: 22120 FeetTVD at Proposed Total Measured Depth 7000 Feet

Distance from the proposed wellbore to nearest existing or proposed wellbore belonging to another operator, including plugged wells:

Enter distance if less than or equal to 1,500 feet: 9 Feet No well belonging to another operator within 1,500 feetWill a closed-loop drilling system be used? YesIs H₂S gas reasonably expected to be encountered during drilling operations at concentrations greater than or equal to 100 ppm? No If yes, attach an H₂S Drilling Plan unless a plan was already submitted with the Form 2A per Rule 304.c.(10).Will there be hydraulic fracture treatment at a depth less than 2,000 feet in this well? NoWill salt sections be encountered during drilling? NoWill salt based (>15,000 ppm Cl) drilling fluids be used? NoWill oil based drilling fluids be used? YesBOP Equipment Type: Annular Preventor Double Ram Rotating Head None

Beneficial reuse or land application plan submitted? _____

Reuse Facility ID: _____ or Document Number: _____

CASING PROGRAM

<u>Casing Type</u>	<u>Size of Hole</u>	<u>Size of Casing</u>	<u>Grade</u>	<u>Wt/Ft</u>	<u>Csg/Liner Top</u>	<u>Setting Depth</u>	<u>Sacks Cmt</u>	<u>Cmt Btm</u>	<u>Cmt Top</u>
CONDUCTOR	26	16	a53b	36.95	0	80	105	80	0
SURF	13+1/2	9+5/8	j55	36	0	4160	1412	4160	0
1ST	8+1/2	5+1/2	p110	20	0	22120	3294	22120	4160

 Conductor Casing is NOT planned**POTENTIAL FLOW AND CONFINING FORMATIONS**

<u>Zone Type</u>	<u>Formation /Hazard</u>	<u>Top M.D.</u>	<u>Top T.V.D.</u>	<u>Bottom M.D.</u>	<u>Bottom T.V.D.</u>	<u>TDS (mg/L)</u>	<u>Data Source</u>	<u>Comment</u>
Groundwater	Upper Pierre Aquifer	0	0	4106	3392	501-1000	Electric Log Calculation	WIEST J 28-25 05123263410000
Confining Layer	Base of Upper Pierre	4106	3392	4836	3770			
Hydrocarbon	Larimer ("Parkman") Sand	4836	3770	4990	3850			
Confining Layer	Larimer ("Parkman") Base	4990	3850	6091	4420			
Hydrocarbon	Terry ("Sussex") Sand	6091	4420	6293	4525			
Confining Layer	Terry ("Sussex") Base	6293	4525	7162	4975			
Hydrocarbon	Hygiene ("Shannon") Sand	7162	4975	7789	5300			
Confining Layer	Hygiene ("Shannon") Base	7789	5300	10915	6910			
Confining Layer	Sharon Springs	10915	6910	11340	7000			
Hydrocarbon	Niobrara	11340	7000	22120	7000			

OPERATOR COMMENTS AND SUBMITTAL

Comments

The distance to the completed portion of the nearest well in the same unit on the "Spacing & Formations" tab is measured to the proposed T-BONE 22N-20-11. This distance was measured in 2-dimensional space.

The distance to the nearest well belonging to another operator on the "Drilling Plans" tab was measured to Domke #1 (API #05-123-10902). Since the referenced offset well is abandoned, a stimulation setback consent is not required.

The producing interval of the Strong 3-15 (API #05-123-11661) is less than 150' from the proposed completed interval. A STIMULATION SETBACK CONSENT signed by KP Kauffman Company Inc. is attached.

The wellbore of the Strong 4-22 (API #05-123-11858) is less than 150' from the proposed wellbore. Since the completed interval is greater than 150' from the proposed wells completed interval a stimulation setback consent is not required.

This application is in a Comprehensive Area Plan _____ CAP #: _____
Oil and Gas Development Plan Name T-Bone 5N66W OGD OGD ID#: 48777
Location ID: 489258

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

Signed: _____ Print Name: Grant Gerrard

Title: Regulatory Analyst Date: 4/5/2025 Email: ggerrard@civiresources.com

Based on the information provided herein, this Application for Permit-to-Drill complies with ECMC Rules, applicable orders, and SB 19-181 and is hereby approved.

ECMC Approved: _____ Director of ECMC Date: _____
Expiration Date: _____

API NUMBER
05

CONDITIONS OF APPROVAL, IF ANY LIST

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.

COA Type	Description
0 COA	

Operator Best Management Practices

No	BMP/COA Type	Description
1	Drilling/Completion Operations	One of the first wells drilled on the pad during the first rig occupation will be logged with open-hole resistivity log with gamma-ray log from the kick-off point into the surface casing for one of the stratigraphically deepest wells on the pad. All wells on the pad will have a cement bond log with gamma-ray run on production casing (or on intermediate casing if production liner is run) into the surface casing. The horizontal portion of every well will be logged with a measured-while drilling gamma-ray log. The Form 5, Completion Report, for each well on the pad will list all logs run and have those logs attached. The Form 5 for a well without open-hole logs will state "Alternative Logging Program - No open-hole logs were run" and will clearly identify the type of log and the well (by API#) in which open-hole logs were run.
2	Drilling/Completion Operations	Operator will perform an anti-collision evaluation of all active (producing, shut in, or temporarily abandoned) offset wellbores that have the potential of being within 150 feet of a proposed well prior to drilling operations for the proposed well. Notice shall be given to all offset operators prior to drilling.

Total: 2 comment(s)

ATTACHMENT LIST

Att Doc Num	Name
404113768	OffsetWellEvaluations Data
404147804	WELL LOCATION PLAT
404147807	DEVIATED DRILLING PLAN
404148047	DIRECTIONAL DATA
404154580	STIMULATION SETBACK CONSENT

Total Attach: 5 Files

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)