

FORM
2

Rev
12/05

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



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APPLICATION FOR PERMIT TO:

1. Drill, Deepen, Re-enter, **Recomplete and Operate**

2. TYPE OF WELL

OIL GAS COALBED OTHER _____
SINGLE ZONE MULTIPLE ZONE COMMINGLE ZONE

Refiling
Sidetrack

Document Number:
2008620
Plugging Bond Surety

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: DEANNESPECTOR Phone: (303)623-2300 Fax: (303)623-2400
Email: _____

7. Well Name: EDSON & SCHOLL Well Number: 11-14 (ON11)

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

9. Proposed Total Measured Depth: 10830

WELL LOCATION INFORMATION

10. QtrQtr: SESW Sec: 11 Twp: 8S Rng: 96W Meridian: 6
Latitude: 39.359142 Longitude: -108.078536

Footage at Surface: 650 FNL/FSL FSL 2010 FEL/FWL FWL

11. Field Name: ORCHARD Field Number: 62050

12. Ground Elevation: 5934 13. County: MESA

14. GPS Data:

Date of Measurement: 03/02/2007 PDOP Reading: 4.3 Instrument Operator's Name: L.D. VANCE

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

Footage at Top of Prod Zone: FNL/FSL _____ FEL/FWL _____ Bottom Hole: FNL/FSL _____ FEL/FWL _____
Sec: _____ Twp: _____ Rng: _____ Sec: _____ Twp: _____ Rng: _____

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: 600

18. Distance to nearest property line: 650 19. Distance to nearest well permitted/completed in the same formation: 1327

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.)
ILES	ILES			
MANCOS A & B	MNCAB			
NIOBRARA-FRONTIER	NB-FR			
WILLIAMS FORK	WMFK			

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 Bon \$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):
T8S-R96W 6TH PM SEC 11: SE/4SW/4

25. Distance to Nearest Mineral Lease Line: 650 26. Total Acres in Lease: 40

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 27 or 28 are yes, is this location in a sensitive area (Rule 903)? Yes No **If 28, 29, or 30 are "Yes" a pit permit may be required.**

31. Mud disposal: Offsite Onsite
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	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bottom	Cement Top
CONDUCTOR	24	16	.25"	40	4	40	0
SURF	12+1/4	9+5/8	36	1,211	433	1,211	0
1ST	8+3/4	7	23#,J55	6,560	497	6,560	5,040
1ST LINER	6+1/4	4+1/2		10,780	380	10,794	500

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

33. Comments _____

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: Y Print Name: DEANNE SPECTOR

Title: REGULATORY Date: 5/7/2008 Email: DEANNE.SPECTOR@ENCAN

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. Neslin Director of COGCC Date: 9/29/2009

API NUMBER
05 077 10061 00

Permit Number: 20090586 Expiration Date: 9/28/2010

CONDITIONS OF APPROVAL, IF ANY: _____

Condition of Approval

Comment

Agency

24 HOUR SPUD NOTICE REQUIRED. E-MAIL: DAVID.ANDREWS@STATE.CO.US CEMENT TOP VERIFICATION BY CBL REQUIRED. THE PROPOSED SURFACE CASING IS MORE THAN 50' BELOW THE DEPTH OF THE DEEPEST WATER WELL WITHIN 1MILE OF THE SURFACE LOCATION WHEN CORRECTED FOR ELEVATION DIFFERENCES. THE DEEPEST WATER WELL WITHIN 1 MILE IS 900 FEET DEEP. SEE ATTACHED NOTICES
NOTE: ALL NOTICES SHALL BE GIVEN VIA E-MAIL.