

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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Document Number:

1637257

Plugging Bond Surety

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 ☐3. Name of Operator: BARRETT CORPORATION* BILL4. COGCC Operator Number: 100715. Address: 1099 18TH ST STE 2300City: DENVER State: CO Zip: 802026. Contact Name: MATT BARBER Phone: (303)312-8168 Fax: (303)291-0420Email: MBARBER@BILLBARRETTCORP.COM7. Well Name: GGU FED Well Number: 21C-33-6918. Unit Name (if appl): GIBSON GULCH U Unit Number: COC052447
X9. Proposed Total Measured Depth: 8041

WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 33 Twp: 6S Rng: 91W Meridian: 6Latitude: 39.490667 Longitude: -107.567330Footage at Surface: 410 FNL/FSL FNL 268 FEL/FWL FWL11. Field Name: MAMM CREEK Field Number: 5250012. Ground Elevation: 6350.2 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 08/27/2009 PDOP Reading: 5.3 Instrument Operator's Name: C.D. SLAUGH (TRI-STATE LAND SURVEYING)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
<u>531</u>	<u>FNL</u>	<u>1990</u>	<u>531</u>	<u>FNL</u>	<u>1990</u>
		<u>FWL</u>			<u>FWL</u>
Sec: <u>33</u>	Twp: <u>6S</u>	Rng: <u>91W</u>	Sec: <u>33</u>	Twp: <u>6S</u>	Rng: <u>91W</u>

16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 116418. Distance to nearest property line: 2344 19. Distance to nearest well permitted/completed in the same formation: 326

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	191-65		
WILLIAMS FORK	WMFK	191-9		

21. Mineral Ownership: ☐ Fee ☐ State ☒ Federal ☐ Indian Lease #: COC51440

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):
SEC. 33 T6S-R91W-ALL

25. Distance to Nearest Mineral Lease Line: 531 26. Total Acres in Lease: 640

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: EVAPORATION&BACKFILL

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	26	16	42	40		40	0
SURF	12+1/4	9+5/8	36	800	240	800	0
1ST	8+3/4	4+1/2	11.6	8,041	635	8,041	

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

33. Comments THERE ARE NO VISIBLE IMPROVEMENTS WITHIN 400' OF THIS LOCATION. THIS WELL IS PART OF AN ENVIRONMENTAL ASSESSMENT THROUGH THE BLM GLENWOOD SPRINGS ENERGY OFFICE.

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: MATT BARBER

Title: PERMITTING Date: _____ Email: MBARBER@BILLBARRETT.CO

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: _____

Attachment Check List

Att Doc Num	Name	Doc Description
1637257	APD ORIG & 1 COPY	LF@2160557 1637257
1637264	WELL LOCATION PLAT	LF@2160560 1637264
1637265	ACCESS ROAD MAP	LF@2160678 1637265
1637266	MINERAL LEASE MAP	LF@2160680 1637266
1637267	DEVIATED DRILLING PLAN	LF@2160563 1637267
1637268	FED. DRILLING PERMIT	LF@2160566 1637268
1637287	WELL BORE DIAGRAM	LF@2160565 1637287

Total Attach: 7 Files