

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:

1808654

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: NEWFIELD PRODUCTION COMPANY

4. COGCC Operator Number: 10240

5. Address: 1401 17TH ST STE 1000

City: DENVER State: CO Zip: 80202

6. Contact Name: ERIC SUNDBEG Phone: (303)382-4470 Fax: ()

Email: ESUNDBERG@NEWFIELD.COM

7. Well Name: MOSHER Well Number: 1-1H

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

9. Proposed Total Measured Depth: 7100

## WELL LOCATION INFORMATION

10. QtrQtr: SESE Sec: 1 Twp: 13S Rng: 54W Meridian: 6

Latitude: 38.938372 Longitude: -103.388335

Footage at Surface: 647 FNL/FSL 650 FEL/FWL

11. Field Name: WILDCAT Field Number: 99999

12. Ground Elevation: 4864.6 13. County: LINCOLN

## 14. GPS Data:

Date of Measurement: 10/02/2009 PDOP Reading: 2.3 Instrument Operator's Name: GNA

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: 0

18. Distance to nearest property line: 647 19. Distance to nearest well permitted/completed in the same formation: 1

## 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.)
CHEROKEE B	CHRK	318	320	E2 OR S2

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

22. Surface Ownership: ☒ Fee ☐ State ☐ Federal ☐ Indian

23. Is the Surface Owner also the Mineral Owner? ☒ Yes ☐ No Surface Surety ID#: 2007

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):  
SECTION 1: T13N-R54W

25. Distance to Nearest Mineral Lease Line: 647 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: RESERVE PIT

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
SURF	17+1/2	13+3/8	54.5	400	309	400	0
1ST	8+3/4	7	23	7,100	576	7,100	5,500

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: \_\_\_\_\_ Print Name: ERIC SUNDBERG

Title: REGULATORY Date: \_\_\_\_\_ Email: ESUNDBERG@NEWFIELD.C

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: \_\_\_\_\_

<b>API NUMBER</b>  05	Permit Number: _____ Expiration Date: _____
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**CONDITIONS OF APPROVAL, IF ANY:** \_\_\_\_\_

### **Attachment Check List**

Att Doc Num	Name	Doc Description
1808654	APD ORIGINAL	LF@2165210 1808654
1808655	WELL LOCATION PLAT	LF@2165212 1808655
1808656	DRILLING PLAN	LF@2165218 1808656
1808657	TOPO MAP	LF@2165214 1808657
2097742	ACCESS ROAD MAP	LF@2165216 2097742

Total Attach: 5 Files