

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:

1791212

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: FEDERAL Well Number: 22D-33-691

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

9. Proposed Total Measured Depth: 8101

## WELL LOCATION INFORMATION

10. QtrQtr: SWNW Sec: 33 Twp: 6S Rng: 91W Meridian: 6Latitude: 39.486094 Longitude: -107.567860
 Footage at Surface: 2065 FNL/FSL FNL 108 FEL/FWL FWL
11. Field Name: MAMM CREEK Field Number: 5250012. Ground Elevation: 6373 13. County: GARFIELD

## 14. GPS Data:

Date of Measurement: 08/27/2009 PDOP Reading: 1.8 Instrument Operator's Name: D. SLAUGH15. If well is ☒ Directional ☐ Horizontal (highly deviated) **submit deviated drilling plan.**
 Footage at Top of Prod Zone: FNL/FSL 1475 FNL 2000 FWL 1475 FNL 2000 FWL  
 Bottom Hole: FNL/FSL 1475 FNL 2000 FWL 1475 FNL 2000 FWL  
 Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_ Sec: 33 Twp: 6S Rng: 91W
16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 273318. Distance to nearest property line: 2759 19. Distance to nearest well permitted/completed in the same formation: 290

## 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	191-10		
WILLIAMS FORK	WMFK	191-8		

21. Mineral Ownership: ☐ Fee ☐ State ☒ Federal ☐ Indian Lease #: COC-51440

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: 1475 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 & BACKFIL

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	24	40		40	0
SURF	12+1/4	9+5/8	36	810	245	810	0
1ST	8+3/4	4+1/2	11.6	8,101	635	8,101	

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

33. Comments SEE SHEET 2R FOR IMPROVEMENTS WITHIN 400' OF THIS LOCATION. THIS WELL IS PART OF AN ENVIROMENTAL 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: PERMIT ANALYST 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: \_\_\_\_\_

<b>API NUMBER</b>
05

Permit Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**CONDITIONS OF APPROVAL, IF ANY:** \_\_\_\_\_

### **Attachment Check List**

Att Doc Num	Name	Doc Description
1791212	APD ORIGINAL	LF@2170974 1791212
1791213	WELL LOCATION PLAT	LF@2170975 1791213
1791214	ACCESS ROAD MAP	LF@2171037 1791214
1791215	MINERAL LEASE MAP	LF@2171038 1791215
1791216	DEVIATED DRILLING PLAN	LF@2170976 1791216
1791217	FED. DRILLING PERMIT	LF@2170977 1791217

Total Attach: 6 Files