

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:

400014746

Plugging Bond Surety

20090078

3. Name of Operator: PETROLEUM DEVELOPMENT CORPORATION 4. COGCC Operator Number: 691755. Address: 1775 SHERMAN STREET - SUITE 3000City: DENVER State: CO Zip: 802036. Contact Name: Larry Robbins Phone: (303)860-5822 Fax: (303)860-5838Email: lrobbins@petd.com7. Well Name: Puckett Well Number: 11B-24D

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

9. Proposed Total Measured Depth: 9335

WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 24 Twp: 6S Rng: 97W Meridian: 6Latitude: 39.513330 Longitude: -108.173967Footage at Surface: 861 FNL/FSL FNL 1158 FEL/FWL FWL11. Field Name: Grand Valley Field Number: 3129012. Ground Elevation: 8383 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 05/29/2006 PDOP Reading: 3.2 Instrument Operator's Name: Patrick R Green15. 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 _____

402 FNL 677 FWL 430 FNL 660 FWLSec: 24 Twp: 6S Rng: 97W Sec: 24 Twp: 6S Rng: 97W16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 2 mi18. Distance to nearest property line: 861 ft 19. Distance to nearest well permitted/completed in the same formation: 280 ft

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.)
Williams Fork-Cameo	WFCM	510-21		

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):
See attached map

25. Distance to Nearest Mineral Lease Line: 402 ft 26. Total Acres in Lease: 4960

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	20	53	100	100	100	0
SURF	17+1/2	9+5/8	36	2,500	800	2,500	0
1ST	8+3/4	4+1/2	11.6	9,235	953	9,253	5,580

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

33. Comments Drill pad built, no additional surface disturbance or expansion will occur. No drilling pits due to closed loop system. Mud disposal/lease info updated, drilling plan same as expired permit.

34. Location ID: 335518

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: Larry Robbins

Title: Regulatory Agent Date: _____ Email: lrobbins@petd.com

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 05 045 16106 00	Permit Number: _____	Expiration Date: _____
CONDITIONS OF APPROVAL, IF ANY:		

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.

Attachment Check List

Att Doc Num	Name	Doc Description
400014760	LEASE MAP	Puckett OGL.pdf
400014761	30 DAY NOTICE LETTER	Landowner Notice.pdf

Total Attach: 2 Files