

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



DE ET OE ES

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:

1692326

Plugging Bond Surety

20010102

3. Name of Operator: PETRO-CANADA RESOURCES (USA) INC 4. COGCC Operator Number: 72085

5. Address: 999 18TH ST STE 600
City: DENVER State: CO Zip: 80202-2499

6. Contact Name: SUSANMILLER Phone: (303)297-2300 Fax: (393)297-7708
Email: SUMILLER@SUNCOR.COM

7. Well Name: HOLLAR Well Number: 30-35 (DIR)

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

9. Proposed Total Measured Depth: 8099

WELL LOCATION INFORMATION

10. QtrQtr: SESW Sec: 30 Twp: 7N Rng: 66W Meridian: 6
Latitude: 40.540350 Longitude: -104.825630

Footage at Surface: 842 FNL/FSL FSL 1782 FEL/FWL FWL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 4927 13. County: WELD

14. GPS Data:

Date of Measurement: 07/25/2008 PDOP Reading: 2.0 Instrument Operator's Name: BEN ADSIT

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 _____
1328 FSL 1351 FWL 1328 FSL 1351 FWL
Sec: 30 Twp: 7N Rng: 66W Sec: 30 Twp: 7N Rng: 66W

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: 447 ft

18. Distance to nearest property line: 488 ft 19. Distance to nearest well permitted/completed in the same formation: 695 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.)
CODELL/NIOBRARA	NB-CD		160	SW4
J SAND	JSND		160	SW4

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):
7-66: SECTION 30: S/2S/2

25. Distance to Nearest Mineral Lease Line: 492 ft 26. Total Acres in Lease: 160

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
SURF	12+1/4	8+5/8	26	850	610	850	0
1ST	7+7/8	4+1/2	11.6	8,099	1,160	8,099	850

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

33. Comments CONDUCTOR CASING WILL NOT BE UTILIZED.

34. Location ID: 333046

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: SUSAN MILLER

Title: REGULATORY ANALYST Date: 10/21/2009 Email: SUMILLER@SUNCOR.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: David S. Nashin Director of COGCC Date: 11/19/2009

API NUMBER
05 123 29251 00

Permit Number: _____ Expiration Date: 11/18/2010

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.

1) Provide 24 hour notice of MIRU to Ed Binkley at 970-506-9834 or e-mail at ed.binkley@state.co.us 2) Comply with Rule 317.i and provide cement coverage from TD to a minimum of 200' above Niobrara. Verify coverage with cement bond log. 3) Run and submit Directional Survey from TD to base of surface casing. The operator shall comply with Rule 321, and it shall be the operator's responsibility to ensure that the wellbore complies with setback requirements in commission orders or rules prior to producing the well.

Attachment Check List

Att Doc Num	Name	Doc Description
1692326	APD ORIGINAL	LF@2161527 1692326
1692328	WELL LOCATION PLAT	LF@2161528 1692328
1692334	30 DAY NOTICE LETTER	LF@2161529 1692334
1692336	SURFACE AGRMT/SURETY	LF@2161531 1692336
1692337	SURFACE AGRMT/SURETY	LF@2161470 1692337

Total Attach: 5 Files