

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:

400015495

Plugging Bond Surety

1980

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: EXXON MOBIL CORPORATION4. COGCC Operator Number: 286005. Address: P O BOX 4358City: HOUSTON State: TX Zip: 77210-43586. Contact Name: LYNN NEELY Phone: (281)654-1949 Fax: (262)313-9747Email: LYNN.R.NEELY@EXXONMOBIL.COM7. Well Name: FREEDOM UNITWell Number: 197-28A78. Unit Name (if appl): FREEDOM UNITUnit Number: COC069547
X9. Proposed Total Measured Depth: 13

WELL LOCATION INFORMATION

10. QtrQtr: NWSW Sec: 28 Twp: 1S Rng: 97W Meridian: 6Latitude: 39.934530Longitude: -108.295886
 Footage at Surface: 2388 FNL/FSL FSL 237 FEL/FWL FWL
11. Field Name: PICEANCE CREEKField Number: 6880012. Ground Elevation: 608213. County: RIO BLANCO

14. GPS Data:

Date of Measurement: 02/20/2009 PDOP Reading: 3.1 Instrument Operator's Name: D. PETTY15. If well is ☒ Directional ☐ Horizontal (highly deviated) **submit deviated drilling plan.**
 Footage at Top of Prod Zone: FNL/FSL 2030 FSL 1244 FWL FWL Bottom Hole: FNL/FSL 2030 FSL 1244 FWL FWL
 Sec: 28 Twp: 1S Rng: 97W Sec: 28 Twp: 1S Rng: 97W
16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 391 ft18. Distance to nearest property line: 309 ft 19. Distance to nearest well permitted/completed in the same formation: 933 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.)
MESAVERDE	MVRD			
OHIO CREEK	OHCRK			
WASATCH	WSTC			

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#: 198

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 AND MINERAL LEASE AGREEMENT

25. Distance to Nearest Mineral Lease Line: 58 ft 26. Total Acres in Lease: 760

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: BURIAL

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	LINE PIPE	120	96	120	
SURF	14+3/4	10+3/4	45.5	4,100	2,300	4,100	
1ST	9+7/8	7	23 OR 26	8,750	1,380	8,750	3,600
2ND	6+1/8	4+1/2	15.1	12,800	630	12,800	16,200

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

33. Comments SEE ATTACHMENT FOR COMMENTS ON ITEM 29 & 30 AND CASING CEMENTING PROGRAM

34. Location ID: 336043

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: LYNN NEELY

Title: REGULATORY SPECIALIST Date: _____ Email: LYNN.R.NEELY@EXXONMOB

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: _____

Permit Number: _____ Expiration Date: _____

API NUMBER

05

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
400015502	WELL LOCATION PLAT	FRU 197-28A7 Legal Plats.pdf
400015503	DEVIATED DRILLING PLAN	FRU 197-28A7_Directional Plan.pdf
400015504	OTHER	APD Attachment Form 2.pdf
400015505	LOCATION DRAWING	APD Location Plats.pdf
400015506	TOPO MAP	APD Topos_Pics_Description.pdf
400015507	MINERAL LEASE MAP	FRU 197-28A_Mineral Lease & Map.pdf
400015508	SURFACE OWNER CONSENT	FRU 197-28A_Surface Owner Letter.pdf

Total Attach: 7 Files