

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:

400006978

Plugging Bond Surety

20067

3. Name of Operator: ENCANA OIL & GAS (USA) INC

4. COGCC Operator Number: 100185

5. Address: 370 17TH ST STE 1700

City: DENVER State: CO Zip: 80202-5632

6. Contact Name: Miracle Pfister Phone: (720)876-3761 Fax: (720)876-6060

Email: miracle.pfister@encana.com

7. Well Name: Warren Well Number: 15-9BB

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

9. Proposed Total Measured Depth: 8180

WELL LOCATION INFORMATION

10. QtrQtr: NESE Sec: 15 Twp: 7S Rng: 95W Meridian: 6

Latitude: 39.437200 Longitude: -107.976470

 Footage at Surface: 2560 FNL/FSL 605 FEL/FWL
 FSL FEL

11. Field Name: Parachute Field Number: 67350

12. Ground Elevation: 6675.7 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 09/27/2007 PDOP Reading: -1.0 Instrument Operator's Name: Ted Taggart

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
 2582 FSL 629 FEL 1650 FSL 460 FEL
 Sec: 15 Twp: 7S Rng: 95W Sec: 15 Twp: 7S Rng: 95W
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: 784

18. Distance to nearest property line: 188 19. Distance to nearest well permitted/completed in the same formation: 539

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	440-50	320	E3
Williams Fork	WMFK	440-50	320	E2

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):
T7S-R95W Sec 10: E2SW Sec 10: 15 NE, E2NW, N2SE

25. Distance to Nearest Mineral Lease Line: _____ 273 _____ 26. Total Acres in Lease: _____ 400 _____

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+0/0	16+0/0	Linepipe	40	5	40	0
SURF	12+1/4	8+5/8	24#/32#	850	544	850	0
1ST	7+7/8	4+1/2	11.6#	8,180	521	8,180	500

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

33. Comments This well is located within the 3 mile radius of the Project Rulison well (Tier 2). A notification letter was sent to the DOE with the original APD. No changes have been made to this location with regard to the original APD. The location has not been constructed. As per Dennis Ahlstrand, at this time, a Form 2A is not required. TOC will be 500 > TOG

34. Location ID: _____ 334751 _____

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: Miracle Pfister _____

Title: Regulatory Analyst Date: 10/8/2009 Email: miracle.pfister@encana.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: _____

Permit Number: _____ Expiration Date: _____

API NUMBER

05 045 17729 00

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
400007036	FORM 2 SUBMITTED	400007036.pdf
400009185	CORRESPONDENCE	PI15 DOE.pdf
400009186	SURFACE AGRMT/SURETY	PI15 SUA.pdf
400009187	FORM 2 SUBMITTED	400009187.pdf

Total Attach: 4 Files