

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:  
400018013  
Plugging Bond Surety  
20010124

3. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP 4. COGCC Operator Number: 47120

5. Address: P O BOX 173779

City: DENVER State: CO Zip: 80217-3779

6. Contact Name: Cheryl Light Phone: (720)929-6461 Fax: (720)929-7461

Email: cheryl.light@anadarko.com

7. Well Name: FREDERICK STATE Well Number: 1-36

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

9. Proposed Total Measured Depth: 8664

WELL LOCATION INFORMATION

10. QtrQtr: SWSE Sec: 36 Twp: 2N Rng: 68W Meridian: 6

Latitude: 40.098270 Longitude: -104.951240

Footage at Surface: 1454 FNL/FSL FNL 2516 FEL/FWL FEL

11. Field Name: Spindle Field Number: 77900

12. Ground Elevation: 5014 13. County: WELD

14. GPS Data:

Date of Measurement: 10/28/2009 PDOP Reading: 2.8 Instrument Operator's Name: Chris Pearson

15. If well is  Directional  Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL 660 FNL 600 FEL 660 FEL 660 FEL 660 FEL

Sec: 36 Twp: 2N Rng: 68W Sec: 36 Twp: 2N Rng: 68W

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: 1398 ft

18. Distance to nearest property line: 1398 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.)
J Sand	JSND	232	320	E/2
Niobrara/Codell	NBCD	407-87	80	E/2NE

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):  
T2N-R68W, 6TH P.M., SEC. 36: ALL

25. Distance to Nearest Mineral Lease Line: 660 ft 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: \_\_\_\_\_

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	24	850	595	850	
1ST	7+7/8	4+1/2	11.6	8,664	200	8,664	

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

33. Comments NO CONDUCTOR CASING WILL BE USED

34. Location ID: 317628

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: Cheryl Light

Title: Senior Regulatory Analyst Date: \_\_\_\_\_ Email: cheryl.light@anadarko.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: \_\_\_\_\_

<b>API NUMBER</b>	Permit Number: _____	Expiration Date: _____
05	<b>CONDITIONS OF APPROVAL, IF ANY:</b>	

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
400018017	WELL LOCATION PLAT	FREDERICK STATE 1-36 PLAT.pdf
400018018	TOPO MAP	FREDERICK STATE 1-36 Topo.pdf
400018019	MULTI-WELL PLAN	FREDERICK STATE 2 PAD.pdf
400018246	DRILLING PLAN	P_FREDERICK STATE 1-36_PLAN #1 11-20-09 RHS.pdf
400024977	WAIVERS	WELD COUNTY WHOA WAIVER.pdf
400024978	SURFACE AGRMT/SURETY	SURFACE USE AGREEMENT.pdf
400024979	EXCEPTION LOC WAIVERS	FREDERICK STATE 1-36 EXCEPTION WAIVER.doc.pdf
400024980	30 DAY NOTICE LETTER	FREDERICK NOTICE LETTER - WAIVED.pdf

Total Attach: 8 Files