

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:

400028243

Plugging Bond Surety

19880020

3. Name of Operator: MARATHON OIL COMPANY 4. COGCC Operator Number: 536505. Address: 5555 SAN FELIPECity: HOUSTON State: TX Zip: 770566. Contact Name: Anna Walls Phone: (713)296-3468 Fax: (713)513-4394Email: avwalls@marathonoil.com7. Well Name: 696-5C Well Number: 11

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

9. Proposed Total Measured Depth: 10503

WELL LOCATION INFORMATION

10. QtrQtr: Lot 12 Sec: 5 Twp: 6S Rng: 96W Meridian: 6Latitude: 39.554880 Longitude: -108.135630Footage at Surface: 3474 FNL/FSL FNL 1307 FEL/FWL FWL11. Field Name: Grand Valley Field Number: 3129012. Ground Elevation: 8137.8 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 09/28/2008 PDOP Reading: 2.4 Instrument Operator's Name: William H. Dolinar Lic #3807015. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**Footage at Top of Prod Zone: FNL/FSL 2464 FSL 910 FWL 2464 FSL 910 FWLSec: 5 Twp: 6S Rng: 96W Sec: 5 Twp: 6S Rng: 96W16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 7339 ft18. Distance to nearest property line: 1171 ft 19. Distance to nearest well permitted/completed in the same formation: 647 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	WMFK	510-11		

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 Sheet

25. Distance to Nearest Mineral Lease Line: 525 ft 26. Total Acres in Lease: 3441

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	20	16	53	100	100	100	0
SURF	14+3/4	9+5/8	36	2,000	1,000	2,000	0
1ST	8+3/4	4+1/2	11.6	10,503	675	10,503	5,500

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

33. Comments No Rig on Location. The Pad is built. The Pit has been constructed. Construction completed 11/09. Closed loop drilling system. No visible improvements within 400' of wellhead. Decrease surface casing setting depth from 2300' to 2000'. Surface owned by: Chevron Minerals owned by: Chevron

34. Location ID: 413390

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: Anna Walls

Title: Regulatory Compliance Rep Date: _____ Email: avwalls@marathnoil.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 18394 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
400028262	30 DAY NOTICE LETTER	30 day notice letter.pdf.pdf
400028263	PLAT	696-5C-11 plat.pdf.PDF
400028273	WELL LOCATION PLAT	696-5C well location.pdf.PDF

Total Attach: 3 Files