

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:

2095064

Plugging Bond Surety

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: CHEVRON U S A INC4. COGCC Operator Number: 167005. Address: 6001 BOLLINGER CANYON RDCity: SAN RAMON State: CA Zip: 945836. Contact Name: DIANE L. PETERSON Phone: (970)675-3842 Fax: (970)675-3800Email: DLPE@CHEVRON.COM7. Well Name: A.C. MCLAUGHLIN Well Number: 95X8. Unit Name (if appl): RANGELY WEBER Unit Number: COC47675X9. Proposed Total Measured Depth: 6941

WELL LOCATION INFORMATION

10. QtrQtr: SESE Sec: 10 Twp: 2N Rng: 103W Meridian: 6Latitude: 40.152611 Longitude: -108.935353

		FNL/FSL		FEL/FWL
Footage at Surface:	<u>833</u>	<u>FSL</u>	<u>659</u>	<u>FEL</u>

11. Field Name: RANGELY Field Number: 7237012. Ground Elevation: 5567 13. County: RIO BLANCO

14. GPS Data:

Date of Measurement: 11/28/2007 PDOP Reading: 1.9 Instrument Operator's Name: J FLOYD WITH UELS15. 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
<u>1344</u>	<u>FSL</u>	<u>1785</u>	<u>1385</u>	<u>FSL</u>	<u>1880</u>
Sec: <u>10</u>	Twp: <u>2N</u>	Rng: <u>103</u>	Sec: <u>10</u>	Twp: <u>2N</u>	Rng: <u>103</u>
		<u>W</u>			<u>W</u>

16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 1 mi18. Distance to nearest property line: 487 ft 19. Distance to nearest well permitted/completed in the same formation: 170 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.)
WEBER SAND	WEBR			

21. Mineral Ownership: ☐ Fee ☐ State ☒ Federal ☐ Indian Lease #: D032675

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):

AS INDICATED ON ATTACHED MAP - MOST OF SECTION 14 & 13 NW & SW OF SECTION 23 T2N, SE & SW OF SEC 10 T2N R103W

25. Distance to Nearest Mineral Lease Line: 487 ft 26. Total Acres in Lease: 1400

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	9+5/8	36	2,000	789	2,000	0
1ST	8+3/4	7	23	6,653	707	6,653	2,000

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

33. Comments THE PAD HAS BEEN BUILT. NO PITS WILL NEED TO BE CONSTRUCTED (USING CLOSED LOOP DRILLING), NO ADDITIONAL SURFACE DISTURBANCE FOR THE PAD, THE PAD DOES NOT REQUIRE A VARIANCE FROM ANY OF THE RULES LISTED IN RULE 306.d. (1). (II). THE LOCATION IS NOT IN A WILDLIFE RESTRICTED SURFACE OCCUPANCY AREA, SEE ATTACHED MAP.

34. Location ID: _____

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: DIANE L. PETERSON

Title: REGULATORY Date: _____ Email: DLPE@CHEVRON.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

05 103 11408 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
2095064	APD ORIGINAL	LF@2219097 2095064
2095065	TOPO MAP	LF@2219103 2095065
2095066	DEVIATED DRILLING PLAN	LF@2219098 2095066
2095067	CORRESPONDENCE	LF@2219099 2095067

Total Attach: 4 Files