

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:

400029542

Plugging Bond Surety

20010124

3. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP 4. COGCC Operator Number: 471205. Address: P O BOX 173779City: DENVER State: CO Zip: 80217-37796. Contact Name: Cheryl Light Phone: (720)929-6461 Fax: (720)929-7461Email: Cheryl.Light@anadarko.com7. Well Name: NRC Well Number: 35-9

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

9. Proposed Total Measured Depth: 8418

WELL LOCATION INFORMATION

10. QtrQtr: SWSW Sec: 9 Twp: 1N Rng: 67W Meridian: 6Latitude: 40.061097 Longitude: -104.901816Footage at Surface: 1031 FNL/FSL FSL 919 FEL/FWL FWL11. Field Name: Spindle Field Number: 7790012. Ground Elevation: 5052 13. County: WELD

14. GPS Data:

Date of Measurement: 12/10/2009 PDOP Reading: 1.9 Instrument Operator's Name: Travis Kraich15. 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 _____

50 FSL 1315 FWL 50 FSL 1315 FWLSec: 9 Twp: 1N Rng: 67W Sec: 9 Twp: 1N Rng: 67W16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 1031 ft18. Distance to nearest property line: 919 ft 19. Distance to nearest well permitted/completed in the same formation: 995 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	160	GWA
Niobrara/Codell	NBCD	407	160	GWA

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):
Please see attached lease

25. Distance to Nearest Mineral Lease Line: 50 ft 26. Total Acres in Lease: 2217

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	985	690	985	
1ST	7+7/8	4+1/2	11.6	8,418	200	8,418	

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

33. Comments No conductor casing will be used - Unit Configuration: T1N-R67W Sec 9 S2SW4; Sec 16 N2NW4

34. Location ID: 317813

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: DJRegulatory@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: _____

API NUMBER	Permit Number: _____	Expiration Date: _____
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
400029586	MULTI-WELL PLAN	NRC 6 PAD 1N67W9.pdf
400029587	TOPO MAP	NRC 35-9 1N67W9 Topo.pdf
400029588	DRILLING PLAN	NRC 35-9 DIRECTIONAL.pdf
400029589	WELL LOCATION PLAT	NRC 35-9 PLAT.pdf
400029590	PROPOSED SPACING UNIT	NRC 35-9 SPACING UNIT MAP.pdf
400029591	30 DAY NOTICE LETTER	NRC NOTICE LETTER.pdf
400029592	OIL & GAS LEASE	NRC OGL.pdf

Total Attach: 7 Files