

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:

2585831

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: BARRETT CORPORATION* BILL

4. COGCC Operator Number: 10071

5. Address: 1099 18TH ST STE 2300

City: DENVER State: CO Zip: 80202

6. Contact Name: MATT BARBER Phone: (303)312-8168 Fax: (303)291-0420
Email: MBARBER@BILLBARRETTCORP.COM

7. Well Name: GGU MILLER Well Number: 23C-32-691

8. Unit Name (if appl): GIBSON GULCH Unit Number: COC052447
X

9. Proposed Total Measured Depth: 7444

WELL LOCATION INFORMATION

10. QtrQtr: SESW Sec: 32 Twp: 6S Rng: 91W Meridian: 6

Latitude: 39.480512 Longitude: -107.578833

Footage at Surface: 1256 FNL/FSL FSL 2297 FEL/FWL FWL

11. Field Name: MAMM CREEK Field Number: 52500

12. Ground Elevation: 6119.8 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 08/31/2009 PDOP Reading: 2.1 Instrument Operator's Name: D. SLAUGH (TRI STATE LAND SURVEY)

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

Footage at Top of Prod Zone: FNL/FSL 2130 FSL 1900 FEL/FWL FWL Bottom Hole: FNL/FSL 2130 FSL 1900 FEL/FWL FWL
Sec: 32 Twp: 6S Rng: 91W Sec: 32 Twp: 6S Rng: 91W

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: 3178 ft

18. Distance to nearest property line: 360 ft 19. Distance to nearest well permitted/completed in the same formation: 330 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.)
ILES	ILES	191-65		
WILLIAMS FORK	WMFK	191-9		

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 Bond ☐ \$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 LEASE BOUNDARY MAP.

25. Distance to Nearest Mineral Lease Line: 668 ft 26. Total Acres in Lease: 1729

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: EVAPORATION & BACKFILL

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	26	16	42	40		40	0
SURF	12+1/4	9+5/8	36	760	240	760	0
1ST	8+3/4	4+1/2	11.6	7,444	500	7,444	

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

33. Comments: THERE ARE NO VISIBLE IMPROVEMENTS WITHIN 400' (SEE SHEET 2n). THIS WELL IS LOCATED AT THE PENDING MDP PAD #6 FORM 2A. THE WELL IS APPROVED UNDER AN ENVIRONMENTAL ASSESSMENT THROUGH THE BLM GLENWOOD SPRINGS CO OFFICE.

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: MATT BARBER

Title: PERMITTING Date: 1/21/2010 Email: MBARBER@BILLBARRETT.CO

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 05	Permit Number: _____	Expiration Date: _____
	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
2585831	APD ORIGINAL	LF@2434586 2585831
2585832	WELL LOCATION PLAT	LF@2434587 2585832
2585833	MULTI-WELL PLAN	LF@2434589 2585833
2585834	MINERAL LEASE MAP	LF@2434590 2585834
2585835	SURFACE AGRMT/SURETY	LF@2434591 2585835
2585836	DRILLING PLAN	LF@2434592 2585836
2585837	DEVIATED DRILLING PLAN	LF@2434593 2585837
2585844	TOPO MAP	LF@2434588 2585844
400047535	FORM 2 SUBMITTED	400047535.pdf

Total Attach: 9 Files