

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:

400054200

Plugging Bond Surety

20040060

3. Name of Operator: BARRETT CORPORATION* BILL4. COGCC Operator Number: 100715. Address: 1099 18TH ST STE 2300City: DENVER State: CO Zip: 802026. Contact Name: MATT BARBER Phone: (303)312-8168 Fax: (303)291-0420Email: MBARBER@BILLBARRETTCORP.COM7. Well Name: Miller Well Number: 14C-31-691

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

9. Proposed Total Measured Depth: 7079

WELL LOCATION INFORMATION

10. QtrQtr: NESW Sec: 31 Twp: 6S Rng: 91W Meridian: 6Latitude: 39.481175 Longitude: -107.601074
 Footage at Surface: 1579 FNL/FSL FSL 1359 FEL/FWL FWL
11. Field Name: MAMM CREEK Field Number: 5250012. Ground Elevation: 6034 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 09/08/2009 PDOP Reading: 6.0 Instrument Operator's Name: JIM KALMON15. If well is ☒ Directional ☐ Horizontal (highly deviated) **submit deviated drilling plan.**
 Footage at Top of Prod Zone: FNL/FSL 815 FSL 665 FWL FWL Bottom Hole: FNL/FSL 815 FSL 665 FWL FWL
 Sec: 31 Twp: 6S Rng: 91W Sec: 31 Twp: 6S Rng: 91W
16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 320 ft18. Distance to nearest property line: 9 ft 19. Distance to nearest well permitted/completed in the same formation: 325 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	191-10		
WILLAMS FORK	WMFK	191-8		

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 THE ATTACHED LEASE MAP

25. Distance to Nearest Mineral Lease Line: _____ 700 ft 26. Total Acres in Lease: _____ 725

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: EVAPORATING AND BACK

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	720	230	720	0
1ST	8+3/4	4+1/2	11.6	7,079	590	7,079	

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

33. Comments THIS LOCATION. THIS WELL LOCATION IS LOCATED AT THE PENDING MILLER (PAD #5) 14A-31-691 LOCATION ASSESSMENT (DOC ID 400049392).

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: PERMIT ANALYST Date: _____ Email: MBARBER@BILLBARRETTCO

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
400054226	WELL LOCATION PLAT	MILLER 14C-31-691 LP & ADD.pdf
400054227	ACCESS ROAD MAP	MILLER PAD 5 ACCESS TOPO MAP.pdf
400054228	MINERAL LEASE MAP	Miller5_LeaseBoundaryMap_032310.pdf
400054229	SURFACE AGRMT/SURETY	Miller Global SUA 052508.pdf
400054231	SURFACE AGRMT/SURETY	Linkenhoker Memo SUA.pdf
400054232	UNIT CONFIGURATION MAP	Miller5_FedUnitBoundaryMap_032310.pdf
400054233	DRILLING PLAN	WBD Miller 14C-31-691.pdf
400054235	DEVIATED DRILLING PLAN	GGU Miller 14C-31-691 Directional Plan.pdf

Total Attach: 8 Files