

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:

400057369

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: BRYANT Well Number: 36-30

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

9. Proposed Total Measured Depth: 8317

WELL LOCATION INFORMATION

10. QtrQtr: SWSE Sec: 30 Twp: 2N Rng: 68W Meridian: 6Latitude: 40.103055 Longitude: -105.041715
 Footage at Surface: 284 FNL/FSL FSL 1360 FEL/FWL FEL
11. Field Name: SPINDLE Field Number: 7790012. Ground Elevation: 4928 13. County: WELD

14. GPS Data:

Date of Measurement: 03/17/2010 PDOP Reading: 2.1 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 2500 FWL 50 FSL 2500 FWLSec: 30 Twp: 2N Rng: 68W Sec: 30 Twp: 2N Rng: 68W16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 285 ft18. Distance to nearest property line: 284 ft 19. Distance to nearest well permitted/completed in the same formation: 2021 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		160	GWA
NIOBRARA-CODELL	NB-CD	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):
SEE ATTACHED OIL & GAS LEASE

25. Distance to Nearest Mineral Lease Line: _____ 50 ft _____ 26. Total Acres in Lease: _____ 80 _____

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	850	595	850	
1ST	7+7/8	4+1/2	11.6	8,317	200	8,317	
1ST LINER							

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

33. Comments NO CONDUCTOR CASING WILL BE USED. NB-CD & JSND: SEC 30-SESW, SWSE SEC 31-NENW, NWNE

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: CHERYL LIGHT

Title: SR. REGULATORY ANALYST Date: _____ Email: DJREGULATORY@ANADARK

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

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
400057371	WELL LOCATION PLAT	BRYANT 36-30 PLAT.pdf
400057372	TOPO MAP	BRYANT36-30 Topo.pdf
400057373	OIL & GAS LEASE	OGL.pdf
400057374	SURFACE AGRMT/SURETY	SUA.pdf
400057375	DEVIATED DRILLING PLAN	BRYANT 36-30 DIRECTIONAL.pdf
400057376	30 DAY NOTICE LETTER	BRYANT NOTICE LETTER.pdf
400057377	EXCEPTION LOC WAIVERS	Bryant EL Waiver.pdf
400057378	EXCEPTION LOC REQUEST	BRYANT 318A.a EXCEPTION LOC REQUEST.pdf
400057379	PROPOSED SPACING UNIT	BRYANT 36-30 SPACING UNIT MAP.pdf
400057380	MULTI-WELL PLAN	BRYANT 6 PAD 2N68W30.pdf

Total Attach: 10 Files