

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:

2096825

Plugging Bond Surety

20100017

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: ENCANA OIL & GAS (USA) INC

4. COGCC Operator Number: 100185

5. Address: 370 17TH ST STE 1700

City: DENVER State: CO Zip: 80202-5632

6. Contact Name: JUDITH A. WALTER Phone: (720)876-3702 Fax: (720)876-4702
Email: JUDITH.WALTER@ENCANA.COM

7. Well Name: DOUGLAS PASS COM B Well Number: 7702

8. Unit Name (if appl): DOUGLAS PASS Unit Number: COC47614A

9. Proposed Total Measured Depth: 8210

WELL LOCATION INFORMATION

10. QtrQtr: SENW Sec: 10 Twp: 5S Rng: 102W Meridian: 6

Latitude: 39.640121 Longitude: -108.832886

Footage at Surface: 2319 FNL/FSL 1983 FEL/FWL FWL

11. Field Name: ROCK CANYON Field Number: 74005

12. Ground Elevation: 8846 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 01/31/2007 PDOP Reading: 3.1 Instrument Operator's Name: BRIAN BAKER

15. 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 _____

Sec: _____ Twp: _____ Rng: _____ Sec: _____ Twp: _____ Rng: _____

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: 2 mi

18. Distance to nearest property line: 631 ft 19. Distance to nearest well permitted/completed in the same formation: 6650 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.)
MANCOS	MNCS			

21. Mineral Ownership: ☐ Fee ☐ State ☒ Federal ☐ Indian Lease #: COC16982

22. Surface Ownership: ☒ Fee ☐ State ☐ Federal ☐ Indian

23. Is the Surface Owner also the Mineral Owner? ☐ Yes ☒ No Surface Surety ID#: 20090011

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):
T5S, R102W, 6TH PM, SEC 10: ALL; SEC 15: N2; SEC 16: NE

25. Distance to Nearest Mineral Lease Line: 1983 ft 26. Total Acres in Lease: 1120

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	17+1/2	13+3/8	61	900	987	900	0
1ST	12+1/4	9+5/8	36	4,318	1,086	4,318	0
2ND	8+3/4	5+1/2	15.5	8,205	150	8,205	7,300

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

33. Comments API #05-045-06119. ENCANA INTENDS TO REMAIN WITHIN THE ORIGINAL AREA OF DISTURBANCE FOR THESE PROCEDURES. NOTE: THERE IS 2000' OF 17# IN THE HOLE, LOCATION UNKNOWN. CONSULTATION PURSUANT TO RULE 306 HAS TAKEN PLACE.

34. Location ID: 322365

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: JUDITH A. WALTER

Title: REGULATORY Date: 2/26/2010 Email: JUDITH.WALTER@ENCANA.C

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: David S. Neslin Director of COGCC Date: 5/4/2010

API NUMBER

05 045 06119 00

Permit Number: _____ Expiration Date: 5/3/2012

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.

1)24 HOUR NOTICE TO MOVE ON LOCATION REQUIRED. E-MAIL: Shaun.Kellerby@state.co.us 2)THE PROPOSED SURFACE CASING IS MORE THAN 50' BELOW THE DEPTH OF THE DEEPEST WATER WELL WITHIN 1MILE OF THE SURFACE LOCATION WHEN CORRECTED FOR ELEVATION DIFFERENCES. THE DEEPEST WATER WELL WITHIN 1 MILE IS 000 FEET DEEP. 3)LOCATION IS IN A SENSITIVE AREA BECAUSE OF SHALLOW GROUNDWATER; THEREFORE, EITHER ALL PITS MUST BE LINED OR CLOSED LOOP SYSTEM MUST BE IMPLEMENTED. 4)LOCATION IS IN A SENSITIVE AREA BECAUSE OF PROXIMITY TO SURFACE WATER; THEREFORE, OPERATOR MUST ENSURE 110 PERCENT SECONDARY CONTAINMENT FOR ANY VOLUME OF FLUIDS CONTAINED AT WELL SITE DURING COMPLETION/RECOMPLETION OPERATIONS. 5) OPERATOR MUST IMPLEMENT BEST MANAGEMENT PRACTICES TO CONTAIN ANY UNINTENTIONAL RELEASE OF FLUIDS. 6)FLOWBACK FROM FRACING PROCEDURES NEEDS TO BE DIRECTED TO TANKS ONLY.

Attachment Check List

Att Doc Num	Name	Doc Description
2096825	APD ORIGINAL	LF@2434434 2096825
400044905	FORM 2 SUBMITTED	LF@2438551 400044905

Total Attach: 2 Files