

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:

2557141

## Plugging Bond Surety

**APPLICATION FOR PERMIT TO:**


1. ☒ Drill, ☐ Deepen, ☐ Re-enter, ☐ Recomplete and Operate

## 2. TYPE OF WELL

OIL ☐ GAS ☐ COALBED ☒ OTHER MONITORING WELL

SINGLE ZONE ☒ MULTIPLE ZONE ☐ COMMINGLE ZONE ☐

Refiling 

Sidetrack 

3. Name of Operator: COLORADO OIL & GAS CONSERVATION  
COMMISSION
4. COGCC Operator Number: 5
5. Address: 1120 LINCOLN ST SUITE 801  
City: DENVER State: CO Zip: 80203
6. Contact Name: STEVE LINDBLOM Phone: (303)894-2100X1 Fax: (303)894-2109  
Email: STEVEN.LINDBLOM@STATE.CO.US
7. Well Name: DEEP CANYON MW Well Number: 34-4-32-1
8. Unit Name (if appl): \_\_\_\_\_ Unit Number: \_\_\_\_\_
9. Proposed Total Measured Depth: 900

## WELL LOCATION INFORMATION

10. QtrQtr: SESW Sec: 32 Twp: 34N Rng: 4W Meridian: M  
 Latitude: 37.143311 Longitude: -107.309829  
 Footage at Surface: 840 FSL 1961 FWL  
 11. Field Name: Ignacio Blanco Field Number: 38300  
 12. Ground Elevation: 6700 13. County: ARCHULETA

#### 14. GPS Data:

Date of Measurement: 09/11/2008 PDOP Reading: 1.7 Instrument Operator's Name: TRAVIS KING

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: 150 ft

18. Distance to nearest property line: 840 ft 19. Distance to nearest well permitted/completed in the same formation: 5280 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.)
FRUITLAND	FRLDC			

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): \_\_\_\_\_

25. Distance to Nearest Mineral Lease Line: 840 ft 26. Total Acres in Lease: \_\_\_\_\_

### 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
CONDUCTOR	12+1/4	9+5/8	36	45	45	45	0
SURF	8+3/4	7	20	200	55	200	0
1ST	6+1/4	4+1/2	10.5	900	109	900	0

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

33. Comments ALL PIPE STRINGS ARE DESIGNED TO CIRCULATE CEMENT TO THE SURFACE. UTILIZING 14.5 TO 14.8 #/GAL FOR CONDUCTOR PIPE AND SURFACE CASING AND 14.8 #/GAL CEMENT FOR THE LONG STRING.

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: STEVEN LINDBLOM

Title: ENVIRONMENTAL Date: 4/23/2010 Email: STEVEN.LINDBLOM@STATE.

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: 5/21/2010

API NUMBER

05 007 06293 00

Permit Number: \_\_\_\_\_ Expiration Date: 5/20/2012

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.

**Attachment Check List**

Att Doc Num	Name	Doc Description
2557141	APD ORIGINAL	LF@2457967 2557141
2557165	TOPO MAP	LF@2457985 2557165
2557166	WELL LOCATION PLAT	LF@2457968 2557166

Total Attach: 3 Files