

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:
400064464

Plugging Bond Surety
20010124

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: KERR-MCGEE OIL & GAS ONSHORE LP 4. COGCC Operator Number: 47120
 5. Address: P O BOX 173779
 City: DENVER State: CO Zip: 80217-3779
 6. Contact Name: CHERYL LIGHT Phone: (720)929-6461 Fax: (720)929-7461
 Email: CHERYL.LIGHT@ANADARKO.COM
 7. Well Name: MIRACLE Well Number: 8-12
 8. Unit Name (if appl): _____ Unit Number: _____
 9. Proposed Total Measured Depth: 7920

WELL LOCATION INFORMATION

10. QtrQtr: NESE Sec: 12 Twp: 5N Rng: 68W Meridian: 6
 Latitude: 40.413782 Longitude: -104.945468
 Footage at Surface: 2480 FNL/FSL FSL 285 FEL/FWL FEL
 11. Field Name: WATTENBERG Field Number: 90750
 12. Ground Elevation: 4948 13. County: LARIMER

14. GPS Data:

Date of Measurement: 01/26/2010 PDOP Reading: 1.7 Instrument Operator's Name: CHRIS PEARSON

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 _____
1850 FNL 750 FEL 1850 FNL 750 FEL
 Sec: 12 Twp: 5N Rng: 68W Sec: 12 Twp: 5N Rng: 68W

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: 315 ft

18. Distance to nearest property line: 151 ft 19. Distance to nearest well permitted/completed in the same formation: 1389

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	NE/4
NIOBRARA-CODELL	NB-CD	407	80	S/2NE/4

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: 750 ft 26. Total Acres in Lease: 164

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	650	455	650	
1ST	7+7/8	4+1/2	11.6	7,920	200	7,920	
1ST LINER							

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

33. Comments NO CONDUCTOR CASING WILL BE USED

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: _____

API NUMBER	Permit Number: _____	Expiration Date: _____
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
400064465	WELL LOCATION PLAT	MIRACLE 8-12 PLAT.pdf
400064466	TOPO MAP	MIRACLE 8-12 Topo.pdf
400064467	SURFACE AGRMT/SURETY	MIRACLE SUA.pdf
400064468	30 DAY NOTICE LETTER	MIRACLE NOTICE LETTER.pdf
400064469	DEVIATED DRILLING PLAN	MIRACLE 8-12 DIRECTIONAL.pdf
400064470	EXCEPTION LOC REQUEST	REQ EL & TWN WVR.pdf
400064471	WAIVERS	MIRACLE 8-12 EL & TWN WAIVER 318A.a & 318A.c.pdf
400064472	MULTI-WELL PLAN	MIRACLE 7 PAD 5N68W12.pdf
400064473	OIL & GAS LEASE	Oil & Gas Lease - LPG Partners 4-25-10.pdf

Total Attach: 9 Files