

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:

400067561

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: MIRACLE PFISTER Phone: (720)876-3761 Fax: (720)876-4861

Email: miracle.pfister@encana.com

7. Well Name: TWIN CREEK

Well Number: 12-5A2 (F12E)

8. Unit Name (if appl): HUNTER MESA

Unit Number: COC 55972E

9. Proposed Total Measured Depth: 6604

WELL LOCATION INFORMATION

10. QtrQtr: SENW Sec: 12 Twp: 7S Rng: 92W Meridian: 6

Latitude: 39.461980

Longitude: -107.618900

Footage at Surface: 2549 FNL/FSL FNL 1578 FEL/FWL FWL

11. Field Name: MAMM CREEK

Field Number: 52500

12. Ground Elevation: 6144.8

13. County: GARFIELD

14. GPS Data:

Date of Measurement: 08/13/2008 PDOP Reading: 0.0 Instrument Operator's Name: TED TAGGART

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
 1560 FNL 660 FWL 1560 FNL 660 FWL
 Sec: 12 Twp: 7S Rng: 92W Sec: 12 Twp: 7S Rng: 92W
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: 1056 ft

18. Distance to nearest property line: 279 ft 19. Distance to nearest well permitted/completed in the same formation: 416 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			
Williams Fork	WMFK			

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):

T7S-R92W 6TH PM SECTION 1: W2SE, LESS THAT PART OF THE NW/4SE/4 LAYING EAST OF A LINE LYING FIVE FEET EASTERLY OF AND PARALLEL TO THE EASTERLY BANK OF EAST DIVIDE CREE; E2SW SECTION 12: W2NW, E2NW, SWNW, NESW, NWSE.

25. Distance to Nearest Mineral Lease Line: 246 ft 26. Total Acres in Lease: 443

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	20	16	LINEPIPE	40	5	40	0
SURF	12+1/4	9+5/8	36	1,135	547	1,135	0
1ST	7+7/8	4+1/2	11.6	6,604	648	6,604	0

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

33. Comments TOP OF CEMENT FOR THE PRODUCTION CASING IS 500' ABOVE THE TOG. RELATED FORM 2A DOC # IS 400060081.

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: MIRACLE PFISTER

Title: REGULATORY ANALYST Date: _____ Email: miracle.pfister@encana.com

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
400067576		30 Day Drilling Notification Letter to Langegger 5-17-10.pdf
400067579		F12E SDA-Memo 2-12-10.pdf
400067588		Twin Creek 12-5A2 (F12E) Plat.pdf
400067590		Twin Creek 12-5A2 Plan #1.pdf
400067591		Final 12-5A2 Application (00149152).PDF

Total Attach: 5 Files