

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:
400058967
Plugging Bond Surety
20040105

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: BERRY PETROLEUM COMPANY 4. COGCC Operator Number: 10091
5. Address: 1999 BROADWAY STE 3700
City: DENVER State: CO Zip: 80202
6. Contact Name: JANNI KEIDEL Phone: (303)999-4225 Fax: (303)999-4325
Email: jek@bry.com
7. Well Name: MILK CABIN OM Well Number: OM09B P32 595
8. Unit Name (if appl): _____ Unit Number: _____
9. Proposed Total Measured Depth: 12109

WELL LOCATION INFORMATION

10. QtrQtr: SESE Sec: 32 Twp: 5S Rng: 95W Meridian: 6
Latitude: 39.565633 Longitude: -108.070183
Footage at Surface: 936 FNL/FSL FSL 440 FEL/FWL FEL
11. Field Name: PARACHUTE Field Number: 67350
12. Ground Elevation: 8357 13. County: GARFIELD

14. GPS Data:
Date of Measurement: 08/31/2006 PDOP Reading: 2.7 Instrument Operator's Name: ROBERT KAY

15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**
Footage at Top of Prod Zone: FNL/FSL 2235 FSL 357 FEL 357 FEL 357 FEL 357
Bottom Hole: FNL/FSL 2235 FSL 357 FEL 357 FEL 357
Sec: 32 Twp: 5S Rng: 95W Sec: 32 Twp: 5S Rng: 95W

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: 10560 ft
18. Distance to nearest property line: 6125 ft 19. Distance to nearest well permitted/completed in the same formation: 325 ft

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.)
WILLIAMS FORK	WMFK	510-13		SESE

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#: 20040106

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):
PLEASE SEE MINERAL LEASE MAP ATTACHED TO ORIGINAL APD.

25. Distance to Nearest Mineral Lease Line: 6440 ft 26. Total Acres in Lease: 25000

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	30	20	55	90	100	90	0
SURF	16	9+5/8	36	2,500	1,000	2,500	0
3RD	8+3/4	4+1/2	11.6	12,109	600	12,109	

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

33. Comments I certify that there have been no changes on land use, lease description. Pad has been built. Pit has been constructed. Wells have not been drilled. Conductors have not been set. No rig on site. The refile will not require any expansion / additional surface disturbance of pad. The location does not require a variance from any of the rules listed in Rule 306.d. (1). (A). (ii). The location is not in a restricted surface occupancy area. The location is in a sensitive wildlife habitat area for Elk Production. The production casing Top of Cement will be 200' above the Top of Gas.

34. Location ID: 413574

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: JANNI KEIDEL

Title: PERMITTING AGENT Date: _____ Email: jek@bry.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: _____

API NUMBER

05 045 18668 00

Permit Number: _____ Expiration Date: _____

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
400068872	30 DAY NOTICE LETTER	30 Day letter - P32 595 Pad.pdf
400068898	ACCESS ROAD MAP	Access Road Map (Topo B) - P32 595 Pad.pdf
400068899	MINERAL LEASE MAP	NP Mineral Lease .pdf
400068900	DEVIATED DRILLING PLAN	Milk Cabin OM09B (P32 595) Plan #1.pdf
400068901	WELL LOCATION PLAT	Plat # 1 - Milk Cabin OM09B P32 595.pdf

Total Attach: 5 Files