

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



DE	ET	OE	ES
----	----	----	----

Document Number:

400004407

Plugging Bond Surety

19880020

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: MARATHON OIL COMPANY 4. COGCC Operator Number: 53650

5. Address: 5555 SAN FELIPE

City: HOUSTON State: TX Zip: 77056

6. Contact Name: Anna Walls Phone: (713)296-3468 Fax: (713)513-4394

Email: avwalls@marathonoil.com

7. Well Name: 596-33A Well Number: 16

8. Unit Name (if appl): _____ Unit Number: _____

9. Proposed Total Measured Depth: 10400

WELL LOCATION INFORMATION

10. QtrQtr: SENE Sec: 33 Twp: 5S Rng: 96W Meridian: 6

Latitude: 39.571670 Longitude: -108.166400

Footage at Surface: 2629 FNL/FSL FNL 465 FEL/FWL FEL

11. Field Name: Grand Valley Field Number: 31290

12. Ground Elevation: 8117.6 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 09/01/2009 PDOP Reading: 2.4 Instrument Operator's Name: William H. Dolinar Lic. #38070

15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL 1799 FNL 1977 FEL Bottom Hole: FNL/FSL 1799 FNL 1977 FEL

Sec: 33 Twp: 5S Rng: 96W Sec: 33 Twp: 5S Rng: 96W

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: 465 ft 19. Distance to nearest well permitted/completed in the same formation: 639 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.)
Williams Fork	WMFK	510-25	176	N/2

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 sheet

25. Distance to Nearest Mineral Lease Line: 439 ft 26. Total Acres in Lease: 4541

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+2	16	53#	100	100	100	0
SURF	14+3/4	9+5/8	36#	2,000	1,000	2,000	0
1ST	8+3/4	4+1/2	11.6#	10,400	675	10,400	5,500

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

33. Comments No visible improvements w/in 400' of wellhead. Surface owned by: Chevron Minerals owned by: Chevron

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: Anna Walls

Title: Regulatory Compliance Rep Date: _____ Email: awwalls@marathonoil.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	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
400011883	EXCEPTION LOC REQUEST	Exception Letter Request - Director.pdf.PDF
400011884	MINERAL LEASE MAP	Mineral Lease Map.pdf.PDF
400011886	TOPO MAP	Topo.pdf.PDF
400011887	DEVIATED DRILLING PLAN	596-33A-16 Plan 1.pdf
400044079	30 DAY NOTICE LETTER	596-33A 30 day notice letter.PDF
400044087	PLAT	596-33A-16 Plat.PDF
400044732	EXCEPTION LOC WAIVERS	Exception Location Waiver - Surface owner.PDF
400073977	LOCATION DRAWING	596-33A-16 Location Drawing.PDF

Total Attach: 8 Files