

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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APPLICATION FOR PERMIT TO:

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

2. TYPE OF WELL

 OIL ☐ GAS ☐ COALBED ☐ OTHER Monitor
 SINGLE ZONE ☐ MULTIPLE ZONE ☐ COMMINGLE ZONE ☐

 Refiling ☐
 Sidetrack ☐

Document Number:

400083230

Plugging Bond Surety

20090078

3. Name of Operator: PETROLEUM DEVELOPMENT CORPORATION4. COGCC Operator Number: 691755. Address: 1775 SHERMAN STREET - STE 3000City: DENVER State: CO Zip: 802036. Contact Name: Kelly Huffman Phone: (303)831-3974 Fax: (303)860-5838Email: khuffman@petd.com7. Well Name: Warren Well Number: 42-10M

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

9. Proposed Total Measured Depth: 6500

WELL LOCATION INFORMATION

10. QtrQtr: SENE Sec: 10 Twp: 6N Rng: 61W Meridian: 6Latitude: 40.503278 Longitude: -104.187638
 Footage at Surface: 2450 FNL/FSL FNL 560 FEL/FWL FEL
11. Field Name: Krieger Field Number: 4757012. Ground Elevation: 4677 13. County: WELD

14. GPS Data:

Date of Measurement: 07/15/2010 PDOP Reading: 6.0 Instrument Operator's Name: Jerry F. Harcek15. 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 ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 559 ft18. Distance to nearest property line: 200 ft 19. Distance to nearest well permitted/completed in the same formation: 4 mi

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.)
Niobrara Codell	NB-CD	Pending	80	E/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):
Township 6 North, Range 61 West, Section 10: NE/4

25. Distance to Nearest Mineral Lease Line: _____ 200 ft 26. Total Acres in Lease: _____ 160

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	400	210	400	0
1ST	7+7/8	4+1/2	11.6	6,500	1,330	6,500	0

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

33. Comments Conductor casing will not be used. The Warren 42-10M well will be a vertical micro-seismic monitoring well and will have no facilities other than the wellhead itself. Please note that the spacing order for section 10 is pending. A verbal approval was received for Docket No. 1007-SP-21, Cause No. 407.

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: Kelly Huffman

Title: Contract Land Tech Date: _____ Email: khuffman@petd.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
400083234	30 DAY NOTICE LETTER	Warren 42-10M 30-day notice.pdf
400083235	TOPO MAP	Warren 42-10M Topo.pdf
400083236	PLAT	Warren 42-10M Well Certificate.pdf
400083237	EXCEPTION LOC WAIVERS	Warren 42-10M Waivers.PDF
400083240	EXCEPTION LOC REQUEST	Warren 42-10M SLW Letter to Director.pdf

Total Attach: 5 Files