

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 _____
SINGLE ZONE MULTIPLE ZONE COMMINGLE ZONE Refiling
Sidetrack

Document Number:

400086090

Plugging Bond Surety

20060137

3. Name of Operator: OXY USA WTP LP 4. COGCC Operator Number: 665715. Address: P O BOX 27757City: HOUSTON State: TX Zip: 772276. Contact Name: Joan Proulx Phone: (970)263.3641 Fax: (970)263.3694Email: joan_proulx@oxy.com7. Well Name: Cascade Creek Well Number: 697-05-80A

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

9. Proposed Total Measured Depth: 9165

WELL LOCATION INFORMATION

10. QtrQtr: NENE Sec: 8 Twp: 6S Rng: 97W Meridian: 6Latitude: 39.542112 Longitude: -108.238056Footage at Surface: 943 FNL/FSL FNL 1098 FEL/FWL FEL11. Field Name: Grand Valley Field Number: 3129012. Ground Elevation: 8417 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 08/03/2010 PDOP Reading: 1.7 Instrument Operator's Name: Ron Rennke15. 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 _____

569 FSL 515 FEL 569 FSL 515 FELSec: 5 Twp: 6S Rng: 97W Sec: 5 Twp: 6S Rng: 97W16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 5307 ft18. Distance to nearest property line: 2890 ft 19. Distance to nearest well permitted/completed in the same formation: 330 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	510-15		

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 Mineral Lease Description

25. Distance to Nearest Mineral Lease Line: 4854 ft 26. Total Acres in Lease: 9520

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+0/0	16+0/0	65	100	4	100	0
SURF	14+3/4	9+5/8	36	2,690	1,420	2,690	0
1ST	8+3/4	4+1/2	11.6	9,156	1,926	9,156	5,663

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

33. Comments Oxy is both the surface and mineral owner; Rule 305 and 306 are waived. The well pad has been constructed and there is one producing well on this location. A semi-closed loop system will be used. Oxy will provide appropriate housing for essential personnel in order to conduct safe, efficient drilling operations at this well site. The plat references a "blooie pit;" this is not a pit but a flare box. Per GarCo Vacation Ordinance dated 10-5-1987, CR 213 is now OXY's private property north of Sec 8, 7S, 97W, 6 PM.

34. Location ID: 324100

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: Joan Proulx

Title: Regulatory Analyst Date: _____ Email: joan_proulx@oxy.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

05 045 18146 00

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
400086117	MINERAL LEASE MAP	Mineral lease description.PDF
400086118	TOPO MAP	608-41 Topo.pdf
400086119	DEVIATED DRILLING PLAN	CC 697-05-80A Plan 2.pdf
400086120	WELL LOCATION PLAT	697-05-80A Plat.pdf

Total Attach: 4 Files