

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:

400088575

Plugging Bond Surety

20020116

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: XTO ENERGY INC 4. COGCC Operator Number: 1002645. Address: 382 CR 3100City: AZTEC State: NM Zip: 874106. Contact Name: Kelly Kardos Phone: (505)333-3145 Fax: (505)213-0546Email: kelly_kardos@xtoenergy.com7. Well Name: TIFFANY 2 Well Number: #3

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

9. Proposed Total Measured Depth: 3230

WELL LOCATION INFORMATION

10. QtrQtr: SESE Sec: 2 Twp: 32N Rng: 7W Meridian: NLatitude: 37.042006 Longitude: -107.573260
 Footage at Surface: 1110 FNL/FSL FSL 1295 FEL/FWL FEL
11. Field Name: IGNACIO BLANCO Field Number: 3830012. Ground Elevation: 6282 13. County: LA PLATA

14. GPS Data:

Date of Measurement: 04/09/2006 PDOP Reading: 2.1 Instrument Operator's Name: DAVID ALEXANDER JOHNSON15. 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 _____

1809 FSL 788 FEL 1980 FSL 660 FELSec: 2 Twp: 32N Rng: 7W Sec: 2 Twp: 32N Rng: 7W16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 2660 ft18. Distance to nearest property line: 28 ft 19. Distance to nearest well permitted/completed in the same formation: 930 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.)
FRUITLAND COAL	FRLDC	112-185	320	E/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#: 20020116

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):
T32N-R07WSEC. 1: NW/4, N/2 SW/4SEC. 2: NE/4 SE/4, W/2 SE/4, E/2 SW/4SEC.11: NE/4 NW/4.

25. Distance to Nearest Mineral Lease Line: 660 ft 26. Total Acres in Lease: 480

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: CLOSED LOOP MUD SYST

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	225	134	225	0
1ST	7+7/8	5+1/2	15.5	3,230	408	3,230	0

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

33. Comments No conductor csg will be set. Proposed well will be drilled from existing Tiffany C #1 wellpad. This wellpad is located on two surface properties.

34. Location ID: 325466

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 K. Kardos

Title: Sr. Permitting Tech Date: _____ Email: kelly_kardos@xtoenergy.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	Permit Number: _____	Expiration Date: _____
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
400088625	WELL LOCATION PLAT	Tiffany 2 #3 Well Location Plat.pdf
400088626	TOPO MAP	Tiffany 2 #3 TOPO.pdf
400088627	DEVIATED DRILLING PLAN	Tiffany 2-3 DD Plan.pdf
400088628	SURFACE AGRMT/SURETY	8-17-10 Memo SUA Tiffany 2-3 K Decker.pdf
400088629	SURFACE AGRMT/SURETY	8-22-10 Memo SUA Tiffany 2-3 Adobe.pdf
400088631	CONSULT NOTICE	Tiffany 2 #3 Rule 306.pdf
400089046	PROPOSED BMPs	Tiffany 2 #3 Proposed BMPs.pdf

Total Attach: 7 Files

BMP

<u>Type</u>	<u>Comment</u>
Site Specific	Attached
Wildlife	Attached

Total: 2 comment(s)