

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:

400001055

Plugging Bond Surety

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: ENCANA OIL & GAS (USA) INC 4. COGCC Operator Number: 1001855. Address: 370 17TH ST STE 1700City: DENVER State: CO Zip: 80202-56326. Contact Name: DeAnne Spector Phone: (720)876-5826 Fax: (720)876-6060Email: deanne.spector@encana.com7. Well Name: Hittle Cattle Co. Well Number: 1-4H2 (PL1NW)

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

9. Proposed Total Measured Depth: 13148

WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 1 Twp: 10S Rng: 96W Meridian: 6Latitude: 39.223699 Longitude: -108.059555Footage at Surface: 305 FNL/FSL FNL 766 FEL/FWL FWL11. Field Name: Plateau Field Number: 6930012. Ground Elevation: 6009 13. County: MESA

14. GPS Data:

Date of Measurement: 05/11/2009 PDOP Reading: -1.0 Instrument Operator's Name: Ted Taggart, BY15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**Footage at Top of Prod Zone: FNL/FSL 867 FNL 1250 FWL Bottom Hole: FNL/FSL 650 FSL 735 FELSec: 1 Twp: 10S Rng: 96W Sec: 1 Twp: 10S Rng: 96W16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 5500 ft18. Distance to nearest property line: 305 ft 19. Distance to nearest well permitted/completed in the same formation: _____

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.)
Iles	ILES		640	
Mancos	MNCS		640	
Niobrara	NBRR	166-28	640	
Williams Fork	WMFK		640	

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):
 T10S-R95W: Sec 6: Lots 6 & 7; T10S-R96W Sec. 1: Lot 4 SWNW, S/2 S/2; Sec. 12 W2N/4 NENW NWNE

25. Distance to Nearest Mineral Lease Line: 650 ft 26. Total Acres in Lease: 637

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	2+2/24	+/20	.25 wall	40	4	40	
SURF	1+1/17	+/13	72#	1,000	725	1,000	
1ST	+/7	+/5	17#		621		500
NEW	9+1/11	+/9	40#	8,189	818	8,189	4,504

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

33. Comments _____

34. Location ID: 3

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: DeAnne Spector

Title: Regulatory Analyst Date: 7/20/2009 Email: deanne.spector@encana.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

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.

24-HOUR SPUD NOTICE REQUIRED. E-MAIL david.Andrews@state.co.us

CEMENT-TOP VERIFICATION BY CBL REQUIRED

THE MOISTURE CONTENT OF ANY DRILL CUTTINGS IN A CUTTINGS PIT, TRENCH, OR PILE SHALL BE AS LOW AS PRACTICABLE TO PREVENT ACCUMULATION OF LIQUIDS GREATER THAN DE-MINIMIS AMOUNTS. AT THE TIME OF CLOSURE, THE DRILL CUTTINGS MUST ALSO MEET THE APPLICABLE STANDARDS OF TABLE 910-1.

THE PROPOSED SURFACE CASING IS MORE THAN 50' BELOW THE DEPTH OF THE DEEPEST WATER WELL WITHIN 1-MILE OF THE SURFACE LOCATION WHEN CORRECTED FOR ELEVATION DIFFERENCES. THE DEEPEST WATER WELL WITHIN 1-MILE IS 480 FEET DEEP.

Attachment Check List

Att Doc Num	Name	Doc Description
400001056	LOCATION PICTURES	HITTLE 1-4H Photos E-N.pdf
400001057	LOCATION PICTURES	HITTLE 1-4H Photos S-W.pdf
400001058	LOCATION PICTURES	HITTLE 1-4H ROAD VIEWS.pdf
400001059	DEVIATED DRILLING PLAN	Hittle Cattle 1-4H2 (PL1NW Pad) Plan #2.pdf
400001062	317B NOTIFICATION	Wtr Dist Ltr.pdf
400001063	HYDROLOGY MAP	HydrologyPL1NW.pdf
400001064	30 DAY NOTICE LETTER	30 Day Notification.pdf
400001065	OTHER	BUFFER.pdf
400001066	WELL LOCATION PLAT	PLAT.pdf
400001067	TOPO MAP	TOPO MAP.pdf

Total Attach: 10 Files