

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

Refilling   
Sidetrack

Document Number:  
400129385  
Plugging Bond Surety  
20100210

3. Name of Operator: XTO ENERGY INC 4. COGCC Operator Number: 100264

5. Address: 382 CR 3100  
City: AZTEC State: NM Zip: 87410

6. Contact Name: Kelly Kardos Phone: (505)333-3145 Fax: (505)213-0546  
Email: kelly\_kardos@xtoenergy.com

7. Well Name: GOLDEN EAGLE Well Number: 34-11

8. Unit Name (if appl): \_\_\_\_\_ Unit Number: \_\_\_\_\_

9. Proposed Total Measured Depth: 1899

WELL LOCATION INFORMATION

10. QtrQtr: NESW Sec: 34 Twp: 33S Rng: 67W Meridian: 6  
Latitude: 37.125352 Longitude: -104.877031

Footage at Surface: 1780 feet <sup>FNL/FSL</sup> FSL 2015 feet <sup>FEL/FWL</sup> FWL

11. Field Name: PURGATOIRE RIVER Field Number: 70830

12. Ground Elevation: 7317 13. County: LAS ANIMAS

14. GPS Data:

Date of Measurement: 01/11/2011 PDOP Reading: 6.0 Instrument Operator's Name: GARY TERRY

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

Footage at Top of Prod Zone: \_\_\_\_\_ <sup>FNL/FSL</sup> \_\_\_\_\_ <sup>FEL/FWL</sup> Bottom Hole: \_\_\_\_\_ <sup>FNL/FSL</sup> \_\_\_\_\_ <sup>FEL/FWL</sup>

Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_ Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_

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: 3625 ft

18. Distance to nearest property line: 2000 ft 19. Distance to nearest well permitted/completed in the same formation: 1724

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.)
RATON	RTON			
VERMEJO	VRMJ			

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

25. Distance to Nearest Mineral Lease Line: 1780 26. Total Acres in Lease: 5710

### 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: BURY/HAUL

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	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
CONDUCTOR	17+1/2	13+3/8	54		45	98	45	0
SURF	11	8+5/8	24		450	300	450	0
1ST	7+7/8	5+1/2	15.5		1,899	100	1,899	1,175
			Stage Tool		1,175	190	1,175	0

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

33. Comments **DOW WATER WELL CC2 IS LOCATED WITHIN 1 MILE OF THE PROPOSED LOCATION. THE WELLHEAD HAS MOVED, BUT IS ON THE ORIGINALLY PERMITTED PAD. DOW POD AND WAIVER ATTACHED.**

34. Location ID: 309415

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: \_\_\_\_\_

<b>API NUMBER</b> 05 071 09506 00	Permit Number: _____ Expiration Date: _____
<b>CONDITIONS OF APPROVAL, IF ANY:</b>	

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.

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**Attachment Check List**

Att Doc Num	Name
400129406	PLAT
400129407	CONSULT NOTICE
400129408	TOPO MAP
400129410	PROPOSED BMPs
400129411	LEASE MAP
400129412	SURFACE AGRMT/SURETY
400129413	WAIVERS

Total Attach: 7 Files

**General Comments**

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)

**BMP**

<u>Type</u>	<u>Comment</u>

Total: 0 comment(s)