

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:

400131271

Plugging Bond Surety

19810003

3. Name of Operator: CHEVRON PRODUCTION COMPANY 4. COGCC Operator Number: 16700

5. Address: 100 CHEVRON RD
City: RANGELY State: CO Zip: 81648

6. Contact Name: DIANE PETERSON Phone: (970)675-3842 Fax: (970)675-3800
Email: DLPE@CHEVRON.COM

7. Well Name: FEE Well Number: 160X

8. Unit Name (if appl): RANGELY Unit Number: COC47675X

9. Proposed Total Measured Depth: 6565

WELL LOCATION INFORMATION

10. QtrQtr: SE SE Sec: 28 Twp: 2N Rng: 102W Meridian: 6

Latitude: 40.108864 Longitude: -108.840440

Footage at Surface: 765 feet ^{FNL/FSL} FSL 442 feet ^{FEL/FWL} FEL

11. Field Name: RANGELY Field Number: 72370

12. Ground Elevation: 5276 13. County: RIO BLANCO

14. GPS Data:

Date of Measurement: 10/22/2010 PDOP Reading: 0.9 Instrument Operator's Name: J FLOYD

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

Footage at Top of Prod Zone: ^{FNL/FSL} 1305 ^{FEL/FWL} FSL 111 ^{FEL/FWL} FWL Bottom Hole: ^{FNL/FSL} 1461 ^{FEL/FWL} FSL 235 ^{FEL/FWL} FWL
Sec: 27 Twp: 2N Rng: 102 Sec: 27 Twp: 2N Rng: 102
W W

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: 140 ft

18. Distance to nearest property line: 425 ft 19. Distance to nearest well permitted/completed in the same formation: 205 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.)
WEBER SANDS	WEBR		20	

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):
 SW OF SECTION 28 AND E 1/2 OF THE NE 1/4 OF SECTION 32 AND NW 1/8 OF NW OF SECTION 27 AND E 1/2 OF E 1/2 OF SE OF SECTION 21, AND SW 1/4 OF SECTION 22 AND W 1/2 OF W 1/2 OF SE 1/4 OF SECTION 22 ALL IN T2N, RANGE 102W. SEE ATTACHED MAP.

25. Distance to Nearest Mineral Lease Line: 2248 ft 26. Total Acres in Lease: 800

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 28 or 29 are yes, is this location in a sensitive area (Rule 901.e)? Yes No

31. Mud disposal: Offsite Onsite **If 28, 29, or 30 are "Yes" a pit permit may be required.**

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	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
CONDUCTOR	12+1/4	9+5/8	36#	0	2,000	789	2,000	0
1ST	8+3/4	7+0/8	23#	0	5,714	707	5,714	0

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

33. Comments POWER LINE WEST OF LOCATION WILL BE REMOVED DURING WELL PAD CONSTRUCTION

34. Location ID: 421429

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: DIANE L PETERSON

Title: REGULATORY SPECIALIST Date: 2/8/2011 Email: DLPE@CHEVRON.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.

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Attachment Check List

Att Doc Num	Name
400131271	FORM 2 SUBMITTED
400131406	DEVIATED DRILLING PLAN
400131411	DRILLING PLAN
400131417	FED. DRILLING PERMIT
400131418	PLAT
400131420	LEASE MAP
400131427	LOCATION PICTURES
400131436	HYDROLOGY MAP
400131439	TOPO MAP
400131441	ACCESS ROAD MAP
400131443	H2S CONTINGENCY PLAN
400131452	PROPOSED BMPs

Total Attach: 12 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)