

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

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:

400146873

Plugging Bond Surety

3. Name of Operator: ENCANA OIL & GAS (USA) INC 4. COGCC Operator Number: 100185

5. Address: 370 17TH ST STE 1700  
City: DENVER State: CO Zip: 80202-5632

6. Contact Name: MIRACLE PFISTER Phone: (720)876-3761 Fax: (720)876-4861  
Email: miracle.pfister@encana.com

7. Well Name: Federal Well Number: 30-5H2 (D29OU)

8. Unit Name (if appl): ORCHARD Unit Number: COC066496  
X

9. Proposed Total Measured Depth: 13800

WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 29 Twp: 8S Rng: 96W Meridian: 6  
Latitude: 39.325953 Longitude: -108.138452

Footage at Surface: 804 feet FNL/FSL FNL 798 feet FEL/FWL FWL

11. Field Name: GRAND VALLEY Field Number: 31290

12. Ground Elevation: 5568 13. County: MESA

14. GPS Data:

Date of Measurement: 05/10/2010 PDOP Reading: 0.0 Instrument Operator's Name: TED TAGGART

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

Footage at Top of Prod Zone: FNL/FSL 721 FNL 730 FWL 784 Bottom Hole: FNL/FSL 2551 FSL 784 FWL 784  
Sec: 29 Twp: 8S Rng: 96W Sec: 30 Twp: 8S Rng: 96W

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: 440 ft

18. Distance to nearest property line: 2637 ft 19. Distance to nearest well permitted/completed in the same formation: 650 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.)
MANCOS	MNCS			

21. Mineral Ownership:  Fee  State  Federal  Indian Lease #: COC58678

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):  
 8S-96W SEC 30: NE, E2NW, E2SE, LOTS 1-4 SEC 31: E2 SEC 32: SWSW

25. Distance to Nearest Mineral Lease Line: 50 26. Total Acres in Lease: 781

**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	24	16	LINEPIPE	0	40	5	40	0
SURF	14+3/4	10+3/4	40.5	0	1,500	818	1,500	0
1ST	9+7/8	7+5/8	29.7	0	6,300	791	6,300	0
2ND	6+1/2	5	23	0	13,800	494	13,800	5,800

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

33. Comments THE NEAREST DISTANCE IS TO A BUILDING AND ABOVE GROUND UTILITY. INTERMEDIATE CASING TOP OF CEMENT WILL BE 200' ABOVE MESAVERDE.

34. Location ID: 334093

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: MIRACLE PFISTER

Title: REGULATORY ANALYST Date: \_\_\_\_\_ Email: miracle.pfister@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: \_\_\_\_\_

<b>API NUMBER</b>	Permit Number: _____	Expiration Date: _____
05	<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.

--

**Attachment Check List**

<u>Att Doc Num</u>	<u>Name</u>
400150036	
400150038	
400150063	

Total Attach: 3 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)