


<b>FORM</b> <b>2</b> Rev 12/05	<b>State of Colorado</b> <b>Oil and Gas Conservation Commission</b> 1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">DE</td> <td style="width: 25%;">ET</td> <td style="width: 25%;">OE</td> <td style="width: 25%;">ES</td> </tr> </table>	DE	ET	OE	ES
DE	ET	OE	ES				
<b>APPLICATION FOR PERMIT TO:</b>			Document Number:  1634847  Plugging Bond Surety  20010124				
1. <input type="checkbox"/> Drill, <input type="checkbox"/> Deepen, <input type="checkbox"/> Re-enter, <input checked="" type="checkbox"/> <b>Recomplete and Operate</b>							
2. TYPE OF WELL OIL <input type="checkbox"/> GAS <input checked="" type="checkbox"/> COALBED <input type="checkbox"/> OTHER _____ SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/> COMMINGLE ZONE <input checked="" type="checkbox"/>			Refiling <input type="checkbox"/> Sidetrack <input type="checkbox"/>				
3. Name of Operator: <u>KERR-MCGEE OIL &amp; GAS ONSHORE LP</u>							
4. COGCC Operator Number: <u>47120</u>							
5. Address: <u>P O BOX 173779</u> City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-3779</u>							
6. Contact Name: <u>CHERYL LIGHT</u> Phone: <u>(720)929-6461</u> Fax: <u>(720)929-7461</u> Email: <u>CHERYL.LIGHT@ANADARKO.COM</u>							
7. Well Name: <u>CARLSON</u>		Well Number: <u>10-26A</u>					
8. Unit Name (if appl): _____		Unit Number: _____					
9. Proposed Total Measured Depth: <u>7827</u>							
<b>WELL LOCATION INFORMATION</b>							
10. QtrQtr: <u>NWSE</u> Sec: <u>26</u> Twp: <u>2N</u> Rng: <u>65W</u> Meridian: <u>6</u> Latitude: <u>40.108068</u> Longitude: <u>-104.629419</u>							
Footage at Surface: <u>2200</u> feet FNL/FSL <u>2170</u> feet FEL/FWL <u>FEL</u>							
11. Field Name: <u>WATTENBERG</u>		Field Number: <u>90750</u>					
12. Ground Elevation: <u>4920</u>		13. County: <u>WELD</u>					
14. GPS Data: Date of Measurement: <u>12/19/2005</u> PDOP Reading: <u>4.2</u> Instrument Operator's Name: <u>CHRIS FISHER</u>							
15. If well is <input type="checkbox"/> Directional <input type="checkbox"/> Horizontal (highly deviated) <b>submit deviated drilling plan.</b> Footage at Top of Prod Zone: FNL/FSL _____ FEL/FWL _____ Bottom Hole: FNL/FSL _____ FEL/FWL _____ Sec: _____ Twp: _____ Rng: _____ Sec: _____ Twp: _____ Rng: _____							
16. Is location in a high density area? (Rule 603b)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
17. Distance to the nearest building, public road, above ground utility or railroad: <u>440</u> ft							
18. Distance to nearest property line: <u>440</u> ft 19. Distance to nearest well permitted/completed in the same formation: <u>1023</u> ft							
<b>20. LEASE, SPACING AND POOLING INFORMATION</b>							
Objective Formation(s)	Formation Code	Spacing Order Number(s)	Unit Acreage Assigned to Well	Unit Configuration (N/2, SE/4, etc.)			
NIOBRARA-CODELL	NB-CD	407	80	W/2SE4			

**IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.**

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 LEASE DATED DECEMBER 7, 1970

25. Distance to Nearest Mineral Lease Line: \_\_\_\_\_ 440 ft \_\_\_\_\_ 26. Total Acres in Lease: \_\_\_\_\_ 160 \_\_\_\_\_

**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
SURF	12+1/4	8+5/8		24	921	645	921	
1ST	7+7/8	4+1/2		11	7,791	285	7,791	6,347
			Stage Tool		5,790	100	6,110	6,078

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

33. Comments A FORM 2A IS NOT REQUIRED FOR THIS RECOMPLETION BECAUSE NO PIT WILL BE CONSTRUCTED AND THERE WILL BE NO ADDITIONAL SURFACE DISTURBANCE BEYOND THE ORIGINALLY DISTURBED AREA. RECOMPLETION FORM 4 DOC # 1634851

34. Location ID: \_\_\_\_\_ 331770 \_\_\_\_\_

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: \_\_\_\_\_ CHERYL LOGHT \_\_\_\_\_

Title: \_\_\_\_\_ SR REGUALTORY ANALYST \_\_\_\_\_ Date: \_\_\_\_\_ 4/4/2011 \_\_\_\_\_ Email: \_\_\_\_\_ CHERYL.LIGHT@ANADARKO. \_\_\_\_\_

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: \_\_\_\_\_ *David S. Neslin* \_\_\_\_\_ Director of COGCC Date: \_\_\_\_\_ 5/5/2011 \_\_\_\_\_

**API NUMBER**

05 123 21272 00

Permit Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ 5/4/2013 \_\_\_\_\_

**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.**

Provide 48 hour notice of MIRU to Jim Precup at 303-726-3822 or e-mail at jim.precup@state.co.us.

**Attachment Check List**

Att Doc Num	Name
1634847	APD ORIGINAL
1634848	OIL & GAS LEASE
1634849	SURFACE AGRMT/SURETY
1634850	30 DAY NOTICE LETTER

Total Attach: 4 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)