

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:			Document Number: 1635027 Plugging Bond Surety 20100017	
1. <input type="checkbox"/> Drill, <input type="checkbox"/> Deepen, <input type="checkbox"/> Re-enter, <input checked="" type="checkbox"/> Recomplete and Operate				
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 checked="" type="checkbox"/> COMMINGLE ZONE <input checked="" type="checkbox"/>			Refiling <input type="checkbox"/> Sidetrack <input type="checkbox"/>	
3. Name of Operator: <u>ENCANA OIL & GAS (USA) INC</u> 4. COGCC Operator Number: <u>100185</u>				
5. Address: <u>370 17TH ST STE 1700</u> City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202-5632</u>				
6. Contact Name: <u>JENNIFER LIND</u> Phone: <u>(720)876-5890</u> Fax: <u>(720)876-6890</u> Email: <u>JENIFFER.LIND@ENCANA.COM</u>				
7. Well Name: <u>POWERS</u> Well Number: <u>14-24</u>				
8. Unit Name (if appl): _____ Unit Number: _____				
9. Proposed Total Measured Depth: <u>4910</u>				
WELL LOCATION INFORMATION				
10. QtrQtr: <u>SWSW</u> Sec: <u>24</u> Twp: <u>2N</u> Rng: <u>65W</u> Meridian: <u>6</u> Latitude: <u>40.118293</u> Longitude: <u>-104.619697</u>				
Footage at Surface: <u>560</u> feet <u>FSL</u> <u>560</u> feet <u>FWL</u>				
11. Field Name: <u>WATTENBERG</u> Field Number: <u>90750</u>				
12. Ground Elevation: <u>4910</u> 13. County: <u>WELD</u>				
14. GPS Data: Date of Measurement: <u>06/04/2009</u> PDOP Reading: <u>1.5</u> Instrument Operator's Name: <u>P. LINDERHOLM</u>				
15. If well is <input type="checkbox"/> Directional <input type="checkbox"/> Horizontal (highly deviated) submit deviated drilling plan. 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>2685 ft</u>				
18. Distance to nearest property line: <u>560 ft</u> 19. Distance to nearest well permitted/completed in the same formation: <u>1020 ft</u>				
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.)
NIORARA	NBRR	407-66	320	S/2

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):
T2N-R65w-SEC,24: S/2SW/4, SWSE
25. Distance to Nearest Mineral Lease Line: 560 ft 26. Total Acres in Lease: 120

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	0	942	372	942	0
1ST	7+7/8	4+1/2	11.6	0	7,888	240	7,888	6,540

32. BOP Equipment Type: Annular Preventer Double Ram Rotating Head None
33. Comments THE RECOMPLETION DOES NOT REQUIRE A FORM 2A AS NO PITS WILL BE CONSTRUCTED AND THERE WILL BE NO ADDITIONAL SURFACE DISTURBANCE OUTSIDE OF THE ORIGINALLY DISTURBED AREA.

34. Location ID: 331879
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: JENNIFER LIND
Title: REGUALTORY ANALYST Date: 4/13/2011 Email: JENNIFER.LIND@ENCANA.C

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: 5/10/2011

API NUMBER: **05 123 21436 00** Permit Number: _____ Expiration Date: 5/9/2013
CONDITIONS OF APPROVAL, IF ANY: _____

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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
1635027	FORM 2 SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Spacing is consistant with other wells in the 320	4/22/2011 1:43:35 PM
Permit	waiting for spacing unit clarification. Changed from S/2 to S/2SW4	4/21/2011 2:57:14 PM

Total: 2 comment(s)

BMP

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

Total: 0 comment(s)