

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		<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				

APPLICATION FOR PERMIT TO:

1. **Drill,** Deepen, Re-enter, Recomplete and Operate

2. TYPE OF WELL

OIL GAS COALBED OTHER lateral
 SINGLE ZONE MULTIPLE ZONE COMMINGLE ZONE

Refiling
 Sidetrack

Document Number:
 400154729
 Plugging Bond Surety
 19980020

3. Name of Operator: CHESAPEAKE OPERATING INC 4. COGCC Operator Number: 16660

5. Address: P O BOX 18496
 City: OKLAHOMA CITY State: OK Zip: 73154-0496

6. Contact Name: LISA SMITH Phone: (303)8579999 Fax: (303)4509200
 Email: lspermitco@aol.com

7. Well Name: Hediger Well Number: 14-9-67 1H

8. Unit Name (if appl): _____ Unit Number: _____

9. Proposed Total Measured Depth: 11598

WELL LOCATION INFORMATION

10. QtrQtr: SW SE Sec: 14 Twp: 9N Rng: 67W Meridian: 6
 Latitude: 40.741157 Longitude: -104.855969

Footage at Surface: 350 feet FSL 1980 feet FEL
FNL/FSL FEL/FWL

11. Field Name: Wildcat Field Number: 99999

12. Ground Elevation: 5364 13. County: WELD

14. GPS Data:
 Date of Measurement: 02/24/2011 PDOP Reading: 2.4 Instrument Operator's Name: Paul Orme

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

Footage at Top of Prod Zone: FNL/FSL FEL/FWL Bottom Hole: FNL/FSL FEL/FWL
917 FSL 1986 FEL 600 FNL 1980 FEL
 Sec: 14 Twp: 9N Rng: 67W Sec: 14 Twp: 9N Rng: 67W

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: 350 ft

18. Distance to nearest property line: 350 ft 19. Distance to nearest well permitted/completed in the same formation: 5280 ft

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.)
Niobrara	NBRR	535-2	640	All

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#: 20000041
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):
T9N - R67W: Section 14: All
25. Distance to Nearest Mineral Lease Line: 600 ft 26. Total Acres in Lease: 640

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	9+5/8	40	0	1,000	322	1,000	0
1ST	8+3/4	4+1/2	11.6	0	11,598	2,003	11,598	0

32. BOP Equipment Type: Annular Preventer Double Ram Rotating Head None
33. Comments This is a sidetrack horizontal lateral. No conductor casing will be set.

34. Location ID: 423189
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: LISA SMITH
Title: Regulatory Supervisor Date: 4/19/2011 Email: lspermitco@aol.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: David S. Neslin Director of COGCC Date: 5/29/2011

Permit Number: _____ Expiration Date: 5/28/2013

API NUMBER
05 123 33525 01

CONDITIONS OF APPROVAL, IF ANY:

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

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.

- 1) Provide 24 hour notice of MIRU to Bo Brown at e-mail bo.brown@state.co.us.
- 2) Comply with Rule 317.i and provide cement coverage from TVD to a minimum of 200' above Niobrara. Verify coverage with cement bond log.
- 3) Comply with Rule 321. Run and submit Directional Survey from TD to base of surface casing. Ensure that the wellbore complies with setback requirements in commission orders or rules prior to producing the well.

Attachment Check List

Att Doc Num	Name
400154729	FORM 2 SUBMITTED
400155142	PLAT
400155145	DEVIATED DRILLING PLAN

Total Attach: 3 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Ready to pass. w/o Pilot hole approval doc # 400154704 and API #. plg.	5/2/2011 2:47:31 PM

Total: 1 comment(s)

BMP

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

Total: 0 comment(s)