

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
Document Number: 2587291			
PluggingBond SuretyID 20010124			

APPLICATION FOR PERMIT TO:

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

2. TYPE OF WELL

OIL ☐ GAS ☒ COALBED ☐ OTHER \_\_\_\_\_  
SINGLE ZONE ☐ MULTIPLE ☒ COMMINGLE ☐

Refiling ☐  
Sidetrack ☐

3. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP 4. COGCC Operator Number: 47120  
5. Address: P O BOX 173779  
City: DENVER State: CO Zip: 80217-3779  
6. Contact Name: CHERYL LIGHT Phone: (720)929-6461 Fax: (720)929-7461  
Email: DJREGULATORY@ANADARKO.COM  
7. Well Name: EVERETT NICHOLS Well Number: 1  
8. Unit Name (if appl): \_\_\_\_\_ Unit Number: \_\_\_\_\_  
9. Proposed Total Measured Depth: 7840

WELL LOCATION INFORMATION

10. QtrQtr: NWNE Sec: 8 Twp: 2N Rng: 65W Meridian: 6  
Latitude: 40.159062 Longitude: -104.687491

Footage at Surface: 550 feet FNL/FSL 2560 feet FEL/FWL  
FNL FEL

11. Field Name: WATTENBERG Field Number: 90750  
12. Ground Elevation: 4877 13. County: WELD

14. GPS Data:

Date of Measurement: 06/13/2006 PDOP Reading: 2.5 Instrument Operator's Name: CHRIS FISHER

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 \_\_\_\_\_  
Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_ Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_

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: 515 ft

18. Distance to nearest property line: 550 ft 19. Distance to nearest well permitted/completed in the same formation: 685 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.)
NIOBRARA	NBRR	407-87	160	NE/4

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 Bond ☐ \$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):

25. Distance to Nearest Mineral Lease Line: 550 ft

26. Total Acres in Lease: 320

### 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	213	225	213	0
1ST	7+7/8	4+1/2	10.5	0	7,836	200	7,836	7,050
			Stage Tool		730	250	730	163

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 # 2587289

34. Location ID: 318070

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 LIGHT

Title: REGULATORY Date: 7/14/2011 Email: DJREGULATORY@

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. Nashin Director of COGCC Date: 8/14/2011

#### API NUMBER

05 123 08338 00

Permit Number: \_\_\_\_\_ Expiration Date: 8/13/2013

#### 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.

- 1) Provide 48 hour notice of MIRU to Jim Precup at 303-726-3822 or e-mail at jim.precup@state.co.us.
- 2) Note that it was assumed that the stage tool identified on this APD was proposed as the COGCC has no record of that being installed, per the submitted Completion Report and CBL on file. Both of which were submitted in August of 1995.
- 3) Note the stage tool setting depth changes. Place remedial cement to comply with Rule 317.i, set stage cement from 730' to at least 50' above the existing surface casing shoe and from 200' below Sussex to 200' above Sussex. Supply the cement volume necessary to provide this required coverage.
- 4) Within 30 days after recomplete, submit a Form 5 with CBL to document remedial cement in accordance with Rule 308A (change of wellbore configuration) and a Form 5A to document new status of both formations in accordance with Rule 308B.

### **Attachment Check List**

Att Doc Num	Name
2481050	SURFACE CASING CHECK
2587291	FORM 2 SUBMITTED

Total Attach: 2 Files

### **General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Data Entry	CHECK CASING LINER TOP - ENTERED 0 RECOMPLETE ENTERED - DRILL NOT ACCEPTED BY SOFTWARE.	7/19/2011 9:17:50 AM

Total: 1 comment(s)

### **BMP**

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

Total: 0 comment(s)