

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

Document Number:
400199248
Plugging Bond Surety ID#: 20100017

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: Nick Curran Phone: (720)876-5288 Fax: (720)876-6288
Email: nick.curran@encana.com

7. Well Name: DINNER Well Number: 4-8-14

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

9. Proposed Total Measured Depth: 7920

WELL LOCATION INFORMATION

10. QtrQtr: SWSE Sec: 14 Twp: 4N Rng: 66W Meridian: 6
Latitude: 40.306520 Longitude: -104.741830

Footage at Surface: 672 feet FNL/FSL FSL 1917 feet FEL/FWL FEL

11. Field Name: HAMBERT Field Number: 33530

12. Ground Elevation: 4722 13. County: WELD

14. GPS Data:

Date of Measurement: 05/17/2010 PDOP Reading: 1.3 Instrument Operator's Name: TOM WINANS

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

Footage at Top of Prod Zone: FNL/FSL 50 FSL 2500 FWL _____ Bottom Hole: FNL/FSL 50 FSL 2500 FWL _____
 Sec: 14 Twp: 4N Rng: 66W Sec: 14 Twp: 4N Rng: 66W

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: 468 ft

18. Distance to nearest property line: 672 ft 19. Distance to nearest well permitted/completed in the same formation: 860 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.)
CODELL	CODL	407	160	GWA
J SAND	JSND	232	160	GWA
NIOBRARA	NBRR	407	160	GWA

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):
 PLS SEE ATTACHED RIDER FOR LEASE DESCRIPTION

25. Distance to Nearest Mineral Lease Line: 50 ft 26. Total Acres in Lease: 210

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: close loop sys will be used

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	500	182	500	
1ST	7+7/8	4+1/2	11.6	0	7,920	182	7,920	6,786

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

33. Comments **NO CONDUCTOR CASING WILL BE USED. PROPOSED SPACING UNIT, SESW, SWSE, SEC 14 NENW NWNE SEC 23WE ARE SIMPLY ADDING THE J SAND FORMATION (OWNED) TO THIS APPROVED APD.**

34. Location ID: 332746

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: Nick Curran

Title: Permitting Agent Date: 8/25/2011 Email: nick.curran@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: _____

API NUMBER
05 123 31813 00

Permit Number: _____ Expiration Date: _____

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.

Attachment Check List

Att Doc Num	Name
400199248	FORM 2 SUBMITTED
400199390	LEGAL/LEASE DESCRIPTION
400199392	LOCATION PICTURES
400199395	WELL LOCATION PLAT
400199396	PROPOSED SPACING UNIT
400199661	TOPO MAP
400199673	30 DAY NOTICE LETTER
400199775	LEASE MAP
400200102	DEVIATED DRILLING PLAN
400200103	LOCATION DRAWING

Total Attach: 10 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)