

APPLICATION FOR PERMIT TO:

Document Number:
 400209119
 PluggingBond SuretyID

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: WEXPRO COMPANY 4. COGCC Operator Number: 95960
 5. Address: P O BOX 45003
 City: SALT LAKE CITY State: UT Zip: 84145-0601
 6. Contact Name: Tammy Fredrickson Phone: (307)3527514 Fax: (307)3527575
 Email: Tammy.Fredrickson@Questar.com
 7. Well Name: BW Musser Well Number: 59
 8. Unit Name (if appl): Powder Wash Unit Number: COC047671
A
 9. Proposed Total Measured Depth: 9308

WELL LOCATION INFORMATION

10. QtrQtr: NENW Sec: 9 Twp: 11N Rng: 97W Meridian: 6
 Latitude: 40.933453 Longitude: -108.298750
 Footage at Surface: 575 feet FNL 2031 feet FWL
 11. Field Name: Powder Wash Field Number: 69800
 12. Ground Elevation: 6699 13. County: MOFFAT

14. GPS Data:
 Date of Measurement: 08/30/2010 PDOP Reading: 1.1 Instrument Operator's Name: D. Kay

15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**
 Footage at Top of Prod Zone: 422 FSL 2445 FWL Bottom Hole: 422 FSL 2445 FWL
 Sec: 4 Twp: 11N Rng: 97W Sec: 4 Twp: 11N Rng: 97W

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: 669 ft
 18. Distance to nearest property line: 16191 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 1200 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.)
Fort Union	FTUN			
Wasatch	WSTC			

21. Mineral Ownership: Fee State Federal Indian Lease #: COD
0038749A
 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):
See Attached Map

25. Distance to Nearest Mineral Lease Line: 422 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: Closed Loop System

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
CONDUCTOR	20+0/0	16+0/0	42	0	80	155	80	0
SURF	12+3/4	9+5/8	36	0	1,500	834	1,500	0
1ST	7+7/8	4+1/2	13.5	0	9,308	1,336	9,308	0

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

33. Comments This well will be directionally drilled and there will be four additional well bores on the pad to minimize surface disturbance. This pad is covered under the BW Musser 41 Pad Surface Use Plan dated 09/08/2011.

34. Location ID: _____

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: Jimmy L. Druce

Title: Operations Manager Date: _____ Email: Tammy.Fredrickson@Questar.

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	Permit Number: _____	Expiration Date: _____
05	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
400209131	LEASE MAP
400209132	DEVIATED DRILLING PLAN
400209133	DRILLING PLAN
400209134	FED. DRILLING PERMIT
400209135	PLAT
400209136	TOPO MAP
400209137	ACCESS ROAD MAP

Total Attach: 7 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>
Construction	Storm water and erosion control methods will be utilized from the start of construction until stabilization of the site.
Structural Practices	The tanks will be surrounded by a containment that is capable of containing 110% of the largest tank during the production phase of the well pad.
Drilling/Completion Operations	The location will be bermed in all areas where a fill slope is present to contain all fluids on the location.

Total: 3 comment(s)