

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: 2588525			
PluggingBond SuretyID 20100017			

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: 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: JENNIFER LIND Phone: (720)876-5890 Fax: (720)876-6890
Email: JENNIFER.LIND@ENCANA.COM
7. Well Name: MAIER Well Number: 1
8. Unit Name (if appl): _____ Unit Number: _____
9. Proposed Total Measured Depth: 8035

WELL LOCATION INFORMATION

10. QtrQtr: NENE Sec: 28 Twp: 2N Rng: 66W Meridian: 6
Latitude: 40.113200 Longitude: -104.776837

Footage at Surface: 1170 feet FNL/FSL 1129 feet FEL/FWL FEL
11. Field Name: WATTENBERG Field Number: 90750
12. Ground Elevation: 4949 13. County: WELD

14. GPS Data:

Date of Measurement: 06/04/2009 PDOP Reading: 1.5 Instrument Operator's Name: LINERHOLM

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: 1120 ft
18. Distance to nearest property line: 1120 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 845 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	80	N/2NE/4
NIOBRARA	NBRR	407	80	N/2NE/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):

T2N-R66W-SEC 28: N/2NE/4 LESS AND EXCEPT 6.82 AC.

25. Distance to Nearest Mineral Lease Line: 165 ft

26. Total Acres in Lease: 153

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	232	200	232	0
1ST	7+7/8	4+1/2	11.6	0	8,045	300	8,045	6,718
			Stage Tool	830	830	325	830	0

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

33. Comments THIS RECOMPLETION DOES NOT REQUIRE A FORM 2A AS NO PITS WILL BE CONSTRUCTED AND THERE WILL BE NO ADDITIONAL SURFACE DISTURBANCE BEYOND THE ORIGINALLY DISTURBED AREA. RECOMPLETE FORM 4 DOC #2588523

34. Location ID: 318490

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: REGULATORY Date: 9/12/2011 Email: JENNIFER.LIND@ENCANA.

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: 10/12/2011

API NUMBER

05 123 09189 00

Permit Number: _____ Expiration Date: 10/11/2013

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)Place remedial cement to comply with Rule 317.i, set stage cement from 200' below Sussex to 200' above Sussex. Increase the proposed cement volume accordingly to provide this required coverage.
- 2)Provide 24 hour notice of MIRU to Jim Precup via e-mail at jim.precup@state.co.us.
- 3)Within 30 days after recomplete, submit a Form 5 with a CBL to document the 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
2481192	SURFACE CASING CHECK
2588525	APD ORIGINAL

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	No 2A associated with this well. Passed final completion review.	10/12/2011 8:58:23 AM
Permit	Ready to pass pending public comment 10/10/11	9/20/2011 4:21:53 PM

Total: 2 comment(s)

BMP

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

Total: 0 comment(s)