

**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:  
400252392

PluggingBond SuretyID  
20090078

3. Name of Operator: PETROLEUM DEVELOPMENT CORPORATION      4. COGCC Operator Number: 69175

5. Address: 1775 SHERMAN STREET - STE 3000  
City: DENVER      State: CO      Zip: 80203

6. Contact Name: Liz Lindow      Phone: (303)831-3974      Fax: ()  
Email: llindow@petd.com

7. Well Name: Gaddis      Well Number: 36M-243

8. Unit Name (if appl): \_\_\_\_\_      Unit Number: \_\_\_\_\_

9. Proposed Total Measured Depth: 11736

**WELL LOCATION INFORMATION**

10. QtrQtr: NENW    Sec: 36    Twp: 4N    Rng: 68W    Meridian: 6  
Latitude: 40.276710      Longitude: -104.955810

Footage at Surface:      250 feet      FNL      1370 feet      FNL      FWL

11. Field Name: Wattenberg      Field Number: 90750

12. Ground Elevation: 5057      13. County: WELD

14. GPS Data:  
Date of Measurement: 12/16/2011    PDOP Reading: 1.3    Instrument Operator's Name: Adam Kelly

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

500    FNL    2445    FWL      500    FSL    2445    FWL

Sec: 36    Twp: 4N    Rng: 68W      Sec: 36    Twp: 4N    Rng: 68W

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: 249 ft

18. Distance to nearest property line: 250 ft    19. Distance to nearest well permitted/completed in the same formation(BHL): 558 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	407-87	320	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):

N/2 and SW/4 of Section 36-T4N-R68W

25. Distance to Nearest Mineral Lease Line: 500 ft

26. Total Acres in Lease: 480

### 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

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	36	0	875	730	875	0
1ST	8+3/4	7	26	0	7,754	650	7,754	600
1ST LINER	6+1/8	4+1/2	11.6	6550	11,736			

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

33. Comments Conductor casing will not be used. Operator requests an exception location per rule 318Aa and rule 318Ac: well will not be drilled in a legal drilling window or twinned with an existing well. Waviers attached. Per rule 318Ae, the Operator requests the proposed spacing unit consisting of 320 acres, W2E2 and E2W2 of Sec 36 T4N R68W. Proposed spacing unit map and 30-day certificate is attached.

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: Liz Lindow

Title: Permit Representative Date: \_\_\_\_\_ Email: llindow@petd.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

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
400252403	DIRECTIONAL DATA
400253274	DEVIATED DRILLING PLAN
400253275	PROPOSED SPACING UNIT
400253276	WELL LOCATION PLAT
400253278	EXCEPTION LOC REQUEST
400253279	EXCEPTION LOC WAIVERS
400253280	TOPO 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>

Total: 0 comment(s)