

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

400261974

Date Received:

03/15/2012

PluggingBond SuretyID

20040060

APPLICATION FOR PERMIT TO:

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

2. TYPE OF WELL

OIL ☐ GAS ☒ COALBED ☐ OTHER Horizontal no pilot
SINGLE ZONE ☒ MULTIPLE ☐ COMMINGLE ☐

Refiling ☒

Sidetrack

3. Name of Operator: BARRETT CORPORATION* BILL 4. COGCC Operator Number: 10071

5. Address: 1099 18TH ST STE 2300
City: DENVER State: CO Zip: 80202

6. Contact Name: BRADY RILEY Phone: (303)312-8115 Fax: (303)291-0420
Email: BRILEY@BILLBARRETTCORP.COM

7. Well Name: Gray Well Number: 14N-15-37-17

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

9. Proposed Total Measured Depth: 9808

WELL LOCATION INFORMATION

10. QtrQtr: SESW Sec: 15 Twp: 37n Rng: 17w Meridian: N

Latitude: 37.457370

Longitude: -108.712390

			FNL/FSL		FEL/FWL
Footage at Surface:	300	feet	FSL	1980	feet
					FWL

- | | |
|-------------------------|---------------------|
| 11. Field Name: WILDCAT | Field Number: 99999 |
|-------------------------|---------------------|

12. Ground Elevation: 6692 13. County: MONTEZUMA

- #### 14. GPS Data:

- Date of Measurement: 12/02/2009 PDOP Reading: 1.7 Instrument Operator's Name: T. BARBEE

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					
<u>777</u>		<u>FSL</u>		<u>1982</u>		<u>FWL</u>		<u>660</u>		<u>FNL</u>		<u>1980</u>		<u>FWL</u>		
Sec:	15	Twp:	37N	Rng:	17W			Sec:		15	Twp:	37N	Rng:	17W		

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: 290 ft

18. Distance to nearest property line: 300 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 1337 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.)
Gothic	gosh			

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):

The W/2 of Sec. 15, T37N-R17W is pooled and a pooling declaration is attached. The mineral lease description and acreage number are based on the pooled area.

25. Distance to Nearest Mineral Lease Line: 660 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: EVAP & BURY

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	26	16	65	0	80		80	0
SURF	12+1/4	9+5/8	36	0	2,000	760	2,000	0
1ST	8+3/4	7	26	0	5,968	800	5,968	0
OPEN HOLE	6+1/8	4+1/2	11.6	0	9,808	0	0	0

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

33. Comments This APD is being submitted to request an extension to the permit. APD is updated with new casing and cementing program that was sundried (see attached). Nothing else has been changed since last reviewed/approved. Rule 305/306 consultations were waived.

34. Location ID: 417041

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: BRADY RILEY

Title: PERMIT ANALYST

Date: 3/15/2012

Email: BRILEY@BILLBARRETTCORP

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: 4/12/2012

API NUMBER

05 083 06682 00

Permit Number: _____

Expiration Date: 4/11/2014

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) Conditions stated in the NOTICE TO OPERATOR dated January 29, 2010 will apply (see attached CORRESPONDENCE)
- 2) Minimal H2S operational procedures and equipment is required (see attached H2S CONTINGENCY PLAN)
- 3) Provide 48 hr spud notice to COGCC inspector Steve Labowskie (970) 259-0945 or steve.labowkie@state.co.us

Include the following in the notice:

Operator Name
Well Name and Number
API #
Legal Location
Spud Date

Company Rig Supervisor:

Name
Phone Number
Email address

4) It is the operator's responsibility to ensure that the well bore/perfs complies with setback requirements in Commission orders and/or rules prior to producing the well.

5) Run and submit directional survey(s) for the directional portion of the well

6) Conditions of Approval for Optional Casing Designs

Option A

7" intermediate casing cemented to surface
4 ½" production casing is not cemented and external swell packers in place

Run CBL on 7" casing (rule 317 o.)

Option B

7" intermediate casing cemented to surface
4 ½" production casing is cemented to surface

Run temperature survey on the 7" intermediate casing after cementing (rule 207 a.)
Run CBL on 4 ½" production casing (rule 317 o.)

Option C

7" intermediate casing cemented to surface
4 ½" liner is cemented in place

Run CBL on both 7" intermediate and 4 ½" casings (rule 317 o.)

Attachment Check List

Att Doc Num	Name
1857227	CORRESPONDENCE
1857229	H2S CONTINGENCY PLAN
400261974	FORM 2 SUBMITTED
400261979	OTHER
400261980	DEVIATED DRILLING PLAN
400261981	WAIVERS
400261982	TOPO MAP
400261984	WELL LOCATION PLAT
400261993	SURFACE AGRMT/SURETY

Total Attach: 9 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Final review completed.	4/10/2012 6:43:37 AM
Permit	Requested Barrett not submitted sundries as attachments.	3/26/2012 1:50:22 PM

Total: 2 comment(s)

BMP

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

Total: 0 comment(s)