

FORM
2

Rev
12/05

State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

400289968

Date Received:

05/30/2012

PluggingBond SuretyID

20100227

APPLICATION FOR PERMIT TO:

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

2. TYPE OF WELL

OIL GAS COALBED OTHER Horizontal portion
SINGLE ZONE MULTIPLE COMMINGLE

Refiling

Sidetrack

3. Name of Operator: CONOCO PHILLIPS COMPANY

4. COGCC Operator Number: 19160

5. Address: P O BOX 2197

City: HOUSTON State: TX Zip: 77252-2197

6. Contact Name: Rhonda Rogers Phone: (432)688-9174 Fax: (432)688-6019

Email: rogerr@conocophillips.com

7. Well Name: Tebo 29 Well Number: 1H

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

9. Proposed Total Measured Depth: 11568

WELL LOCATION INFORMATION

10. QtrQtr: SESE Sec: 29 Twp: 4S Rng: 64W Meridian: 6

Latitude: 39.667458 Longitude: -104.568364

Footage at Surface: 265 feet FSL 765 feet FEL

11. Field Name: Wildcat Field Number: 99999

12. Ground Elevation: 5858 13. County: ARAPAHOE

14. GPS Data:

Date of Measurement: 05/17/2012 PDOP Reading: 3.1 Instrument Operator's Name: Robert Kay

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

Footage at Top of Prod Zone: 518 FSL 1360 FEL Bottom Hole: 660 FSL 520 FWL
Sec: 29 Twp: 4S Rng: 64W Sec: 29 Twp: 4S Rng: 64W

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: 3470 ft

18. Distance to nearest property line: 265 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 5280 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.)
Niobrara	NBRR			

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):
 T4SR64W Sec. 28: W/2, Sec 29: All, Sec 32: All, Sec 33: W/2; T5S R64W, Sec. 1: Lots 1, 2, S/2N/2, S/2, Sec 3: Lots 1, 3, 4, S/2N/2, S/2; T5S R63W Sec 6: Lots 1, 2, 3, 4 S/2NE/4, SE/4NW/4, E/2SW/4, SE/4

25. Distance to Nearest Mineral Lease Line: 265 ft 26. Total Acres in Lease: 4473

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
CONDUCTOR	20	16		0	60	50	60	0
SURF	12+1/4	9+5/8	36	0	2,105	660	2,105	0
2ND	8+3/4	7	26	0	8,127	550	8,127	0
1ST LINER	6+1/8	4+1/2	13.5	8127	11,568			

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

33. Comments this is the horizontal portion of 05-0005-07165-01 @ 7177' we will pump the pilot hole cmt plug to 8192' with 335 sx cmt (510 bbls)

34. Location ID: 422693

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: Rhonda

Title: Rogers Date: 5/30/2012 Email: rogerrs@conocophillips.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
05 005 07165 01

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
400289968	FORM 2 SUBMITTED
400290089	WELL LOCATION PLAT
400290090	DRILLING PLAN
400290091	DEVIATED DRILLING PLAN
400290514	DIRECTIONAL DATA

Total Attach: 5 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)