

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:

400292945

Date Received:

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

PluggingBond SuretyID

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: Ace Unit Well Number: 15

8. Unit Name (if appl): Ace Unit Unit Number: COC047584
 X

9. Proposed Total Measured Depth: 9160

WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 10 Twp: 11N Rng: 97W Meridian: 6
 Latitude: 40.932636 Longitude: -108.284633

Footage at Surface: 890 feet FNL 659 feet FWL

11. Field Name: Powder Wash Field Number: 69800

12. Ground Elevation: 6676 13. County: MOFFAT

14. GPS Data:

Date of Measurement: 08/05/2008 PDOP Reading: 2.3 Instrument Operator's Name: D. Cox

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: 3131 ft

18. Distance to nearest property line: 11668 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 1235 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.)
Fort Union	FTUN			
Wasatch	WSTC			

21. Mineral Ownership: Fee State Federal Indian Lease #: COC003689

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 Map Attached

25. Distance to Nearest Mineral Lease Line: 418 ft 26. Total Acres in Lease: 360

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: Evaporation

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+0/0	20+0/0	42	0	80	155	80	0
SURF	12+1/4	9+5/8	36	0	690	393	690	0
1ST	7+7/8	4+1/2	13.5	0	9,160	1,815	9,160	0

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

33. Comments This location is covered by the Master Surface Use Plan, dated 01/01/2009. This is a renewal of the APD. Surface casing depth has been amended to reflect COA in last approval, no other changes have been made since. Wexpro will adhere to all previously associated conditions of approval.

34. Location ID: 413782

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: Jimmy.Druce@Questar.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
05 081 07469 00

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
400292961	DRILLING PLAN
400292962	PLAT
400292966	MINERAL LEASE MAP

Total Attach: 3 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>
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.
Drilling/Completion Operations	The location will be bermed in all areas where a fill slope is present to contain all fluids on the location.
Construction	Storm water and erosion control methods will be utilized from the start of construction until stabilization of the site.

Total: 3 comment(s)