

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:

400342249

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

20030107

3. Name of Operator: WPX ENERGY ROCKY MOUNTAIN LLC4. COGCC Operator Number: 968505. Address: 1001 17TH STREET - SUITE #1200City: DENVER State: CO Zip: 802026. Contact Name: Howard Harris Phone: (303)606-4086 Fax: (303)629-8268Email: howard.harris@wpxenergy.com7. Well Name: Goldsborough Well Number: PA 312-11

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

9. Proposed Total Measured Depth: 8018

WELL LOCATION INFORMATION

10. QtrQtr: SENW Sec: 11 Twp: 7S Rng: 95W Meridian: 6Latitude: 39.452887 Longitude: -107.967476

Footage at Surface: 2412 feet FNL/FSL 2030 feet FEL/FWL
 FNL FWL

11. Field Name: Parachute Field Number: 6735012. Ground Elevation: 6275 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 03/27/2009 PDOP Reading: 2.2 Instrument Operator's Name: J. Kirkpatrick15. 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 _____
1749 FNL 598 FWL 1749 FNL 598 FWL
 Sec: 11 Twp: 7S Rng: 95W Sec: 11 Twp: 7S Rng: 95W

16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 904 ft18. Distance to nearest property line: 219 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 315 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.)
Williams Fork	WMFK	440-56	320	N/2

21. Mineral Ownership: ☒ Fee ☐ State ☐ Federal ☐ Indian Lease #: _____22. Surface Ownership: ☒ Fee ☐ State ☐ Federal ☐ Indian23. 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 ☐ No23b. 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 Attached

25. Distance to Nearest Mineral Lease Line: 690 ft

26. Total Acres in Lease: 115

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: Re-Use, Evap & Backfill

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	24	18	48	0	45	25	45	0
SURF	13+1/2	9+5/8	11.6	0	902	242	902	0
1ST	8+3/4	4+1/2	11.6	0	8,018	863	8,018	

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

33. Comments Top of cement for production casing will be approx 200 feet above the top of Mesaverde. Closed mud system will be used. Fee minerals and surface. This location is constructed, 4 wells have been drilled, 13 more are being permitted. Associated form 2A Doc 1637367 location is approved. Pad is constructed and conductors have been set. No additional disturbance will be made to pad.

34. Location ID: 414939

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: Howard Harris

Title: Sr. Regulatory Specialist

Date: _____

Email: howard.harris@wpenergy.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
400344162	DIRECTIONAL DATA
400344163	WELL LOCATION PLAT
400344164	DEVIATED DRILLING PLAN
400344166	LEGAL/LEASE DESCRIPTION

Total Attach: 4 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)