

FORM
2
Rev
12/05

State of Colorado
Oil and Gas Conservation Commission

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



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APPLICATION FOR PERMIT TO:

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

2. TYPE OF WELL

OIL GAS COALBED OTHER _____
SINGLE ZONE MULTIPLE ZONE COMMINGLE ZONE

Refilling
Sidetrack

Document Number:
400012026
Plugging Bond Surety
20040083

3. Name of Operator: PIONEER NATURAL RESOURCES USA INC 4. COGCC Operator Number: 10084

5. Address: 1401 17TH ST STE 1200
City: DENVER State: CO Zip: 80202

6. Contact Name: Georgina Kovacic Phone: (303)675-2611 Fax: (303)294-1251
Email: georgina.kovacic@pxd.com

7. Well Name: Lynn Well Number: 32-4 Tr

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

9. Proposed Total Measured Depth: 1990

WELL LOCATION INFORMATION

10. QtrQtr: SW/NE Sec: 4 Twp: 33S Rng: 67W Meridian: 6
Latitude: 37.201970 Longitude: -104.889480

Footage at Surface: 2128 FNL/FSL FNL 1614 FEL/FWL FEL

11. Field Name: Purgatoire River Field Number: 70830

12. Ground Elevation: 7531 13. County: LAS ANIMAS

14. GPS Data:

Date of Measurement: 09/29/2009 PDOP Reading: 5.0 Instrument Operator's Name: R. Coberly

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: 450 ft

18. Distance to nearest property line: 404 ft 19. Distance to nearest well permitted/completed in the same formation: 1697 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.)
Raton	RTON	NA		NA

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#: 20040084

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 Bon \$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: 822 ft 26. Total Acres in Lease: 2663

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 27 or 28 are yes, is this location in a sensitive area (Rule 903)? Yes No **If 28, 29, or 30 are "Yes" a pit permit may be required.**

31. Mud disposal: Offsite Onsite

Method: Land Farming Land Spreading Disposal Facility Other: Drilling pit

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	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bottom	Cement Top
CONDUCTOR	12+3/4	12+3/4	33.38	6			
SURF	11	8+5/8	24	530	111	530	0
1ST	7+7/8	5+1/2	15.5	1,990	295	1,990	
S.C. 1.1	7+7/8	5+1/2	15.5	1,990	295	1,990	

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

33. Comments This is a refile, there are some changes made to the original information submitted. The well has not been constructed.

34. Location ID: 333968

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: Georgina Kovacic

Title: Engineering Tech Date: 11/25/2009 Email: georgina.kovacik@pxd.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: David S. Neslin Director of COGCC Date: 12/28/2009

API NUMBER
05 071 09712 00

Permit Number: _____ Expiration Date: 12/27/2011

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) Provide 48 hour notice of MIRU to John Duran at 719-846-4715 or email John.Duran@state.co.us. 2) Provide cement coverage of production casing from TD to 50' above surface casing shoe. Verify coverage with cement bond log. 3) Immediately cease operations and notify the COGCC in the event of any operational problem that could potentially impact water wells in the area.

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Attachment Check List

Att Doc Num	Name	Doc Description
400012929	WELL LOCATION PLAT	LF@2187836 400012929
400012930	TOPO MAP	LF@2187837 400012930
400012931	PLAT	LF@2187838 400012931
400012932	30 DAY NOTICE LETTER	LF@2187839 400012932
400012933	LEGAL/LEASE DESCRIPTION	LF@2187840 400012933
400012934	CONST. LAYOUT DRAWINGS	LF@2187841 400012934
400012935	CONSULT NOTICE	LF@2187842 400012935
400018153	FORM 2 SUBMITTED	LF@2187843 400018153

Total Attach: 8 Files