

FORM
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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



DE ET OE ES

Document Number:
1786850
Plugging Bond Surety

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

Refiling
Sidetrack

3. Name of Operator: ENCANA OIL & GAS (USA) INC 4. COGCC Operator Number: 100185

5. Address: 370 17TH ST STE 1700
City: DENVER State: CO Zip: 80202-5632

6. Contact Name: NICK G. CURRAN Phone: (720)876-5288 Fax: (720)876-6288
Email: NICK.CURRAN@ENCANA.COM

7. Well Name: CALDWELL Well Number: 4-6-26

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

9. Proposed Total Measured Depth: 8288

WELL LOCATION INFORMATION

10. QtrQtr: NWSE Sec: 26 Twp: 2N Rng: 69W Meridian: 6

Latitude: 40.108840 Longitude: -105.081180

Footage at Surface: 2039 FNL/FSL FSL 1947 FEL/FWL FEL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 5087 13. County: BOULDER

14. GPS Data:

Date of Measurement: 03/14/2007 PDOP Reading: 0.2 Instrument Operator's Name: TOM WINANS

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

Footage at Top of Prod Zone: FNL/FSL 1263 FSL 2608 FEL/FWL FEL Bottom Hole: FNL/FSL 1263 FSL 2608 FEL/FWL FEL
Sec: 2 Twp: 2N Rng: 69W Sec: 26 Twp: 2N Rng: 69W

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

18. Distance to nearest property line: 410 19. Distance to nearest well permitted/completed in the same formation: 1059

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.)
CODELL	CODL	407	160	E2SW&W2SE
DAKOTA	DKTA	499-15	160	E2SW&W2SE
J SAND	JSND	232-23	160	E2SW&W2SE
NIOBRARA	NBRR	407	160	E2SW&W2SE

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 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):
T2N-R69W SEC. 25: SW SEC 26 SE

25. Distance to Nearest Mineral Lease Line: _____ 31 _____ 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 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: _____

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
SURF	12+1/4	8+5/8	24	720	310	720	0
1ST	7+7/8	4+1/2	11.6	8,288	290	8,288	7,197

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

33. Comments NO CONDUCTOR CASING WILL BE USED.

34. Location ID: 336475

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: NICK G. CURRAN

Title: REGULATORY Date: _____ Email: NICK.CURRAN@ENCANA.CO

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 05 013 06563 00	Permit Number: _____ Expiration Date: _____
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CONDITIONS OF APPROVAL, IF ANY: _____

Attachment Check List

Att Doc Num	Name	Doc Description
1768650	APD ORIGINAL	LF@2167010 1768650
1768651	LOCATION DRAWING	LF@2167016 1768651
1768652	WELL LOCATION PLAT	LF@2167012 1768652
1768653	TOPO MAP	LF@2167014 1768653
1768654	MINERAL LEASE MAP	LF@2167048 1768654
1768655	SURFACE AGRMT/SURETY	LF@2167018 1768655
1768656	30 DAY NOTICE LETTER	LF@2167020 1768656
1768657	DEVIATED DRILLING PLAN	LF@2167022 1768657
1768658	PROPOSED SPACING UNIT	LF@2167024 1768658

Total Attach: 9 Files