

# *Form 2 Checklist*

**eForm Tab Reference Numbers**

July 8, 2022



**COLORADO**

**Oil & Gas Conservation  
Commission**

Department of Natural Resources

# Well Name & Contact Info Tab (Slide 1 of 1)

Well Name & Contact Info

Well Location

Local Government

Surface & Minerals

Safety Setbacks

Spacing & Formations

Drilling Plan

Casing & Cementing Plan

Offset Wells Evaluation

Operator BMP/COA

Submit

Related Forms

Attachments

## WELL INFORMATION

Application for permit to:

Amend:

Refile:

SideTrack:

Type of Well:

Other:

Zone Type:

COMMINGLE ZONES:

Well Name:

Well Number:

## CONTACT INFORMATION

Contact Name:

(eg. First Name Last Name)

Phone:

Fax:

Email:

Mailing Info:

16

Operator Num:

Suff:

Address:

City:

State:

Zip:



# Well Name & Contact Info Tab (Slide 2 of 2)

Well Name & Contact Info

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## FINANCIAL ASSURANCE FOR PLUGGING, ABANDONMENT, AND RECLAMATION

### COGCC Financial Assurance

**23**  The Operator has provided or will provide Financial Assurance to the COGCC for this Well.

Surety ID Number (if applicable):

**24**

### Federal Financial Assurance

**25**  In checking this box, the Operator certifies that it has provided or will provide at least this amount of Financial Assurance to the federal government for this Well. (Per Rule702.a.)

Amount of Federal Financial Assurance \$

**26**





# Well Location Tab (Slide 1 of 2)

Well Name & Contact Info **Well Location** Local Government Surface & Minerals Safety Setbacks Spacing & Formations Drilling Plan Casing & Cementing Plan  
Offset Wells Evaluation Operator BMP/COA Submit Related Forms Attachments

## WELL LOCATION INFORMATION

### Surface Location **1**

QtrQtr/Lot **2** Sec: **3** Twp: **4** Rng: **5** Meridian: **6**

Footage At Surface: **7** **8** Feet Dir: N/A **9** (FNL/FSL) **10** Feet Dir: N/A **11** (FEL/FWL)

Latitude: **12** Longitude: **13**

GPS Quality Value: **14** Type of GPS Quality Value: **15** Date of Measurement: MM **16** Y

Ground Elevation: **17** Feet

Field Name: **18** Field Number: **19**

Well plan is: N/A **20** If Well plan is Directional or Horizontal attach Deviated Drilling Plan and Directional Data.



# Well Location Tab (Slide 2 of 2)

Well Name & Contact Info **Well Location** Local Government Surface & Minerals Safety Setbacks Spacing & Formations Drilling Plan Casing & Cementing Plan

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## Subsurface Locations **22**

### Top of Productive Zone (TPZ) **23**

Sec:  **24** Twp:  **25** Rng:  **26**

**27** Footage at TPZ:  **28** Feet Dir:  **29** (FNL/FSL)  **30** Feet Dir:  **31** (FEL/FWL)

Measured Depth of TPZ:  **32** True Vertical Depth of TPZ:  **33** Feet

### Base of Productive Zone (BPZ) **34**

Sec:  **35** Twp:  **36** Rng:  **37**

**38** Footage at BPZ:  **39** Feet Dir:  **40** (FNL/FSL)  **41** Feet Dir:  **42** (FEL/FWL)

Measured Depth of BPZ:  **43** Feet True Vertical Depth of BPZ:  **44** Feet

### Bottom Hole Location (BHL) **45**

Sec:  **46** Twp:  **47** Rng:  **48**

**49** Footage at BHL:  **50** Feet Dir:  **51** (FNL/FSL)  **52** Feet Dir:  **53** (FEL/FWL)

# Local Government Tab (Slide 1 of 1)

Well Name & Contact Info   Well Location   **Local Government**   Surface & Minerals   Safety Setbacks   Spacing & Formations   Drilling Plan   Casing & Cementing Plan  
Offset Wells Evaluation   Operator BMP/COA   Submit   Related Forms   Attachments   Review\*   COGCC COAs & Comments\*   Status & NTOs\*

## LOCAL GOVERNMENT PERMITTING INFORMATION **1**

County: **2**   Municipality: **3**


Is the Surface Location of this Well in an area designated as one of State interest and subject to the requirements of § 24-65.1-108 C.R.S.? **4**

Per § 34-60-106(1)(f)(I)(A) C.R.S., the following questions pertain to the Relevant Local Government approval of the siting of the proposed Oil and Gas Location. **5**

SB 19-181 provides that when "applying for a permit to drill," operators must include proof that they sought a local government siting permit and the disposition of that permit application, or that the local government does not have siting regulations. § 34-60-106(1)(f)(I)(A) C.R.S. **6**

Does the Relevant Local Government regulate the siting of Oil and Gas Locations, with respect to this Location? **7**

**If yes, in checking this box, I hereby certify that an application has been filed with the local government with jurisdiction to approve the siting of the proposed oil and gas location.** **8**

The disposition of the application filed with the Relevant Local Government is: **9**   Date of Final Disposition: **10**   

Comments: **11**



# Surface and Minerals Tab (Slide 1 of 2)

Well Name & Contact Info   Well Location   Local Government   **Surface & Minerals**   Safety Setbacks   Spacing & Formations   Drilling Plan   Casing & Cementing Plan  
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## SURFACE AND MINERAL OWNERSHIP AT WELL'S OIL & GAS LOCATION **1**

Surface Owner of the land at this Well's Oil and Gas Location: **2** ▾

Mineral Owner beneath this Well's Oil and Gas Location: N/A **3** ▾

Surface Owner Protection Financial Assurance (if applicable): **4** ▾

Surety ID Number (if applicable): **5**

## MINERALS DEVELOPED BY WELL **6**

The ownership of all the minerals that will be developed by this Well is (check all that apply):

- FEE
- STATE **7**
- FEDERAL
- INDIAN
- N/A



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## LEASE INFORMATION **8**

Using standard QtrQtr, Section, Township, Range format describe one entire mineral lease as follows:

- \* If this Well is within a unit, describe a lease that will be developed by the Well.
- \* If this Well is not subject to a unit, describe the lease that will be produced by the Well.

(Attach a Lease Map or Lease Description or Lease if necessary.)

**9**

Total Acres in Described Lease:

Described Mineral Lease is:

Federal or State Lease #



# Safety Setbacks Tab (Slide 1 of 1)

Well Name & Contact Info Well Location Local Government Surface & Minerals **Safety Setbacks** Spacing & Formations Drilling Plan Casing & Cementing Plan  
Offset Wells Evaluation Operator BMP/COA Submit Related Forms Attachments

## SAFETY SETBACK INFORMATION

Distance from Well to nearest:

Building:  Feet  
Building Unit:  Feet  
Public Road:  Feet  
Above Ground Utility:  Feet  
Railroad:  Feet  
Property Line:  Feet

### INSTRUCTIONS:

- \* Specify all distances per Rule 308.b.(1).
- \* Enter 5280 for distance greater than 1 mile.
- \* Building - nearest building of any type. If nearest Building is a Building Unit, enter same distance for both.
- \* Building Unit – as defined in 100 Series Rules.



# Spacing & Formations Tab (Slide 1 of 2)

Well Name & Contact Info   Well Location   Local Government   Surface & Minerals   Safety Setbacks   **Spacing & Formations**   Drilling Plan   Casing & Cementing Plan  
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## OBJECTIVE FORMATIONS 1

+ Add

🗑 Remove

Showing 1 to 1 of 1 entries

Search:

	Objective Formation(s)	Formation Code		Spacing Order Num(s)	Unit Acreage	Unit Configuration
<input type="checkbox"/>	<span>2</span>	<span>3</span>	<span>☰</span>	<span>4</span>	<span>5</span>	<span>6</span>

Showing 1 to 1 of 1 entries

Search:

+ Add

🗑 Remove

Federal or State Unit Name (if appl):

7

Unit Number:

8



# Spacing & Formations Tab (Slide 2 of 2)

Well Name & Contact Info

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## SUBSURFACE MINERAL SETBACKS

9

Enter 5280 for distance greater than 1 mile.

Is this Well within a unit?

10

If YES:

11

Enter the minimum distance from the Completed Zone of this Well to the Unit Boundary:

12

Feet

Enter the minimum distance from the Completed Zone of this Well to the Completed Zone of an offset Well within the same unit permitted or completed in

the same formation:

13

Feet

If NO:

14

Enter the minimum distance from the Completed Zone of this Well to the Lease Line of the described lease:

15

Feet

Enter the minimum distance from the Completed Zone of this Well to the Completed Zone of an offset Well producing from the same lease and permitted

or completed in the same formation:

16

Feet

Exception Location

17

If this Well requires the approval of a Rule 401.c Exception Location, enter the Rule or spacing order number and attach the Exception Location Request and

Waivers:

18

## SPACING & FORMATIONS COMMENTS

19



# Drilling Plan Tab (Slide 1 of 1)

Well Name & Contact Info

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## DRILLING PROGRAM **1**

Proposed Total Measured Depth: **2** Feet TVD at Proposed Total Measured Depth **3** Feet

Distance from the proposed wellbore to nearest existing or proposed wellbore belonging to another operator, including plugged wells **4**

Enter distance if less than or equal to 1,500 feet: **5** Feet

**6**  No well belonging to another operator within 1,500 feet.

Will a closed-loop drilling system be used? **7** ▾

Is H2S gas reasonably expected to be encountered during drilling operations at concentrations greater than or equal to 100 ppm? **8** ▾ If yes, attach an H2S Drilling Plan unless a plan was already submitted with the Form 2A per Rule 304.c.(10).

Will there be hydraulic fracture treatment at a depth less than 2,000 feet in this well? **9** ▾ If yes attach Geology and Hydrogeology Assessment and Engineering Assessment.

Will salt sections be encountered during drilling? **10** ▾

Will salt based (>15,000 ppm Cl) drilling fluids be used? **11** ▾

Will oil based drilling fluids be used? **12** ▾

BOP Equipment Type: **13**  Annular Preventor  Double Ram  Rotating Head  None

Beneficial reuse or land application plan submitted? **14** ▾

Reuse Facility ID: **15** or Document Number: **16**





# Casing & Cement Plan Tab (Slide 1 of 2)

- Well Name & Contact Info
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**CASING PROGRAM 1** (All depths in this table are measured depths.)

[+ Add](#) [Remove](#)

Showing 1 to 1 of 1 entries

Search:

	Casing Type	Size	Of	Hole	Size	Of	Casing	Grade	Wt/Ft	Csg/Lin Top	Setting Depth	Sacks Cement	Cmt Btm	Cmt Top
<input checked="" type="checkbox"/>	2	3	4	5	6	7	8	9	10	11	12	13	14	15
16	n/a													

Showing 1 to 1 of 1 entries

Search:

[+ Add](#) [Remove](#)

**17** Conductor Casing is NOT planned.

# Casing & Cement Plan Tab (Slide 2 of 2)

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## POTENTIAL FLOW AND CONFINING FORMATION

18

+ Add

Remove

Showing 1 to 1 of 1 entries

Search:

	Zone Type	Formation/Hazard	Top-Measured Depth	Top-true Vertical Depth	Btm-Measured Depth	Btm-True Vertical Depth	TDS(mg/L)	Data Source	Comments
<input type="checkbox"/>	19	20	21	22	23	24	25	26	27

Showing 1 to 1 of 1 entries

Search:

+ Add

Remove



# Offset Wells Evaluation Tab (Slide 1 of 1)

- Well Name & Contact Info
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## OFFSET WELL EVALUATIONS

Total Wells: 0

1

Total Offset Well Operators: 0



2

Meets Standard (STD): 0

3

Needs Evaluation: 0

4

Operator's Wellbore Integrity Contact Email:

5

No Offset Well within 1500'

6

Action: View/Modify Detail

7

Download Data Template

8



# Operator BMP/COA Tab (Slide 1 of 1)

Well Name & Contact Info Well Location Local Government Surface & Minerals Safety Setbacks Spacing & Formations Drilling Plan Casing & Cementing Plan  
Offset Wells Evaluation Operator BMP/COA Submit Related Forms Attachments

## OPERATOR PROVIDED BEST MANAGEMENT PRACTICES, MITIGATION MEASURES, AND CONDITIONS OF APPROVAL

[+ Add](#) [Remove](#)

Showing 1 to 1 of 1 entries

Search:

Item	BMP/COA Type	Description
<input type="checkbox"/> 1 <b>1</b>	<b>2</b>	<b>3</b>

Showing 1 to 1 of 1 entries

Search:

[+ Add](#) [Remove](#)





# Submit Tab (Slide 1 of 2)

Form 02 - Permit to Drill

- Well Name & Contact Info
- Well Location
- Local Government
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## OPERATOR COMMENTS AND SUBMITTAL

Comments

1

This application is in a Comprehensive Area Plan

2

CAP #

3

Oil and Gas Development  
PlanID#

4

OGDP Name:

5

OGDP Expiration Date:

6

Location ID

7

Location Name:

8



# Submit Tab (Slide 2 of 2)

Form 02 - Permit to Drill

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API Number: (if there is an existing API)

05 -  -  -

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Submitter's Name and Email are the same as CONTACT Name and Email?

Print Name:

Title:

Email:



# Related Forms Tab (Slide 1 of 1)


Well Name & Contact Info Well Location Local Government Surface & Minerals Safety Setbacks Spacing & Formations Drilling Plan Casing & Cementing Plan  
Offset Wells Evaluation Operator BMP/COA Submit **Related Forms** Attachments

+ Add

Remove

Showing 1 to 1 of 1 entries

Search:

	Related Type	Document#	Memo	link
<input type="checkbox"/>	1	0 2	3	

Showing 1 to 1 of 1 entries

Search:

+ Add

Remove



# Attachments Tab (Slide 1 of 1)





Well Name & Contact Info   Well Location   Local Government   Surface & Minerals   Safety Setbacks   Spacing & Formations   Drilling Plan   Casing & Cementing Plan  
Offset Wells Evaluation   Operator BMP/COA   Submit   Related Forms   **Attachments**

DOC NUM: 402166679

 **1**    **2**    **3**    **4**

Showing 1 to 2 of 2 entries

Search:

	Desc		Name	View
<input type="checkbox"/>	DIRECTIONAL DATA	 <b>5</b>	402617485.xlsm	 <b>7</b>
<input type="checkbox"/>	CORRESPONDENCE		test.pdf	

Showing 1 to 2 of 2 entries

Search:







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