

Wyoming Oil & Gas Conservation Commission

Office of State Oil and Gas Supervisor

P. O. Box 2640

Casper Wyoming 82602

INFORMATION ON THIS PAGE WILL BE RELEASED TO THE PUBLIC.

12. County: _____ 9. API Number*: (WOGCC Provided) _____

Split Estate If Split Estate, provide Form 1A.

Yes No Answer "Yes" if the Surface owner, on disturbed lands, differs at all from the Mineral owner.

APPLICATION FOR PERMIT TO: (Submit 1 copy on Fed., 2 copies on Fee & 3 copies on State Lands)

DRILL RE-ENTER/ DEEPEN RENEW OR EXTEND

1. 3M Well Injection Monitor

Oil Well Single Zone Directional These in gray require a separate admin. or Comm. approval.

Gas Well Strat. Test Multiple Zone Horizontal (Name ends w/H)

Disposal Other: _____ Natural Drift

16. Mineral Ownership: Fee State Fed

Mineral Lease #, State _____ or Federal: _____

Surface Ownership: Fee State Fed

Yes No Well Spacing: _____

Does this well conform to Chapter 3, Sec.2?

Is this well an exception location? If yes, attach the approval.

2. Operator: _____

Admin Approval (State Office Use) _____

Is this well in a spaced or exempted area?

3. Address: _____

17. Spacing Docket (Reservoir specific. The most recent is usually applicable.) _____

Contact Person: _____ 3b. Phone Number: _____ Email: _____

7. Unit Name - Unit Number: (for committed lands only) _____

4. Location, (quarter-quarter and footages):

Surface (SHL): _____ 11. Lot or Tract, Section, Township & Range:

Top Productive _____ S T , R

8. Well Number and Name: _____

Reservoir(s): _____

Bottom (BHL): _____ S T , R

Latitude (SHL, NAD 83): _____ Longitude (SHL, NAD 83): _____

Latitude (BHL, NAD 83): _____ Longitude (BHL, NAD 83): _____

10. WOGCC Field Name: _____

SETBACK DISTANCE: Per Chapter 3 Section 47, is this surface location less than 1000 feet from an Occupied Structure?

No Yes If YES, file a Mitigation Plan.

19. Proposed depth: MD _____ TVD _____

21. Ungraded Elevation: _____ 21a. Graded Elevation: _____

SETBACK DISTANCE: Per Chapter 3 Section 47, is this surface location less than 350 feet from water?

No Yes If YES, consider moving it.

SIZE OF HOLE	SIZE OF CASING	Lb/ Foot	API PIPE GRADE	NEW / USED	CENTRALIZERS	DEPTH (MD)	Sx of API CEMENT	CLASS

23. DESCRIPTION OF PROPOSED OPERATIONS: If proposal is to directionally drill or deepen, give pertinent data on subsurface locations, measured and true vertical depth. (NOTE ANY PLANNED OPERATIONS PREVIOUSLY SUBMITTED.)

If proposal is to deepen, give data on present productive zone and proposed new productive zone. Give drilling fluids program.

WOGCC DATE STAMP

25. Signed: _____ Title: _____ Date: 3/20/2017

Name _____ Phone: _____ 20. Type of Bond & No.: _____

Operator: Check boxes for included attachments.

Survey Plat Form 1B (Electric) Drilling & BOP Plans Stimulation Completion Plan

Form 1A (Estate) Form 1C (Water Well) Directional/ Horizontal Plan Sage Grouse Core (check if well is within a Core Area)

Conditions of Approval (State Office Use Only):

Notify the Supervisor at least twenty-four (24) hours before SPUD and BOP tests using Check Page 2 for additional Conditions of Approval.

No completion fluids in Any Pit w/o approval. All stimulations must be approved before completing.

(The space below is for State Office use)

Approved By: _____

State Oil and Gas Supervisor

Approval Date: _____

Instructions: Page 3

File a \$500.00 fee with each Form 1.

Consult applicable Federal or State regulations, or appropriate officials, concerning approval of the proposal before operations are started.

All operations must have approval before the work is started.

If this APD is a "RE-ENTER/ DEEPEN" or "RENEWAL OR EXTEND" , please provide any changes in space # 23, "Description of Proposed Operations". These changes may include a location change (with a new plat), new name, new operator or other changes.

Space 1 and 8: If the well is a horizontal, the name/ number must end with an "H". All horizontals must have an application for a horizontal well filed separately. A sample is available under "Downloads".

Space 1: If the proposal is to drill a well under the **direct oversight of another State agency**, please give the Agency and permit number. These are filed as a courtesy to the WOGCC, and require no fee.

Space 1: If the well is to be an **injector**, note injection type under "Other", gas, water Class II, water Class V, H₂S, CO₂, etc.

Space 1: If the well is to be a **disposal**, note disposal type under "Other:", gas, water, H₂S, CO₂, etc.

Space 1: If the well is to be a **monitor**, note monitor type under "Other:", gas, water, H₂S, CO₂, etc.

Space 1: If the well is to be a **water source well** for oil and gas operations, state so under "Other:". Provide the other Agency's permit number. This filing is as a courtesy to the WOGCC.

Space 4: If the proposal is to redrill to the same (current) reservoir at a different subsurface location or to a new and deeper reservoir, use this form with appropriate notations.

Space 4: Spacing orders are based on a **reservoir and the productive interval** in a section or sections. Bottom hole location should be calculated from the section lines and a calculated lat.-long.

Space 4: If the surface location of the well is outside of the required setback, give the location of the hole at the entry or **top of productive or completion interval** of the objective reservoir or pool. If these plans are not filed in space 23, then the plans should be attached and noted below

Space 5: If an oil and gas operator will conduct surface disturbing activities on lands not completely owned by the Mineral owner, lands fall under the "**Split Estates Act**". **Form 1A " STATEMENT OF OIL AND GAS OPERATIONS"** must accompany this permit application.

Space 6: If the well is completing in or testing **multiple reservoirs**, please note the spacing orders for each pool or reservoir.

* **Space 9:** The API # is assigned by the WOGCC for all wells. **It is assigned to its surface location. It stays with that surface location, forever. API #s can only be moved to a new location, but never to a location already assigned another API #. Spud wells can never be moved.**

Space 10: If the well is to be completed in **multiple reservoirs**, Commission approval is required. A sample for commingling is available under "Downloads". If approval has been given, please note it.

Space 16: If the proposed well is on State or Federal Minerals or will pass through State or Federal Minerals, the Mineral Lease Number must be

Space 17: If spaced by rule, leave blank. Otherwise, input docket number or hearing date if docket number not yet assigned

Space 18: If this **location** is less than 1000 feet from an **occupied structure**, please note it. It shall be in compliance with **Chapter 3, Section 47** of these rules. A mitigation plan with notifications will be necessary before construction may begin. (Locations less than 500' will not be permitted

Space 18: If this location is less than 350 feet from water please note what is within 350'. If it is a **water well**, please give SEO permit #, TD and completion design. (Locations less than 350' will usually not be permitted.)

Space 22: Centralizers should be stated in number per 100 feet or as applicable.

Space 23: A **description of proposed operations** must be provided. This proposal must include a **drilling plan**, a **drilling fluids plan** and a **blow out prevention plan**. If these plans are not filed in space 23, then the plans should be attached and noted below Space 25.

Space 23: If this APD will use previously submitted **fieldwide plans**, please provide the Title and submittal date of the approved plan under "Description of Proposed Operations".

Attachment: **Water Well** data shall include all SEO permitted water wells within 1/4 mile of the drilling and spacing unit. The **surface casing (Space 22)** must be at least 100-120 feet deeper than the deepest water well.

Attachment: Unless no pit excavation will be made and cuttings will be removed, all wells planned to be drilled on State or Fee Minerals shall have a **Form 14B, "APPLICATION FOR PERMIT TO CONSTRUCT AND USE AN EARTHEN PIT TEMPORARY USE, OR RESERVE**

Attachment: Form 1A (if **Split Estate**), 1B (**electrical**) and 1C (**baseline water**) must accompany all APDs.

Attachment: If a **reservoir stimulation** is planned, it must be approved on this form (**Form1**), **Form 4, BLM 3160-5** or by a **fieldwide plan**, before the work has started. The requested procedure must include all data required under WOGCC Rules **Chapter 3, Section 1 and 45** .

Attachment: If a spacing or location well is planned, an **exception application for administrative approval and a separate \$75.00 fee** must be filed with this APD. A combined horizontal/ exception location application may be filed rather than one of each, but **must be accompanied with one \$75 check for the exception.**

Attachment: If a horizontal well is planned, a **horizontal application for administrative approval** must be filed with this APD.

Attachment: If a directional well is planned, a **directional survey plan** must be included with this APD.

Wells within **Sage Grouse Core Areas Require a DDCT from the Game and Fish Commission** before approval. Under Executive Order 2011-5, compliance with their Conditions of Approval and Recommendations must be followed. The APD will not be approved without a DDCT and conditions or recommendations from the Wyoming Game and Fish Commission.