

State of Colorado Oil and Gas Conservation Commission

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DE ET OE ES Plugging Bond Surety ID#

APPLICATION FOR PERMIT TO:

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

2. TYPE OF WELL OIL GAS COALBED OTHER SINGLE ZONE MULTIPLE ZONES COMMINGLE ZONES

Refilling Sidetrack

3. Name of Operator, 4. COGCC Operator Number, 5. Address, 6. Contact Name, 7. Well Name, 8. Unit Name, 9. Proposed Total Measured Depth, 10. QtrQtr, Sec, Twp, Rng, Meridian, 11. Field Name, 12. Ground Elevation, 13. County, 14. GPS Data

Attachment Checklist table with columns for OP and COGCC, listing items like APD Orig & 1 Copy, Form 2A, Well location plat, etc.

15. If well is: Directional, Horizontal (highly deviated), submit deviated drilling plan. 16. Is location in a high density area, 17. Distance to nearest building, 18. Distance to Nearest Property Line, 19. Distance to nearest well permitted/completed in the same formation.

LEASE, SPACING AND POOLING INFORMATION

Table with columns: Objective Formation(s), Formation Code, Spacing Order Number (s), Unit Acreage Assigned to Well, Unit Configuration (N/2, SE/4, etc.)

21. Mineral Ownership, 22. Surface Ownership, 23. Is the Surface Owner also the Mineral Owner?, 23a. If 23 is Yes, 23b. If 23 is No, 24. Using standard QtrQtr, Sec, Twp, Rng format enter entire mineral lease description, 25. Distance to Nearest Mineral Lease Line, 26. Total Acres in Lease.

DRILLING PLANS AND PROCEDURES

27. Is H2S anticipated?, 28. Will salt sections be encountered during drilling?, 29. Will salt (>15,000 ppm TDS Cl) or oil based muds be used during drilling?, 30. If questions 27 or 28 are yes, is this location in a sensitive area (Rule 903)?, 31. Mud disposal: Offsite, Onsite

Table with columns: String, Size of Hole, Size of Casing, Weight Per Foot, Setting Depth, Sacks Cement, Cement Bottom, Cement Top

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

33. Comments, 34. Initial Rule 306 Consultation took place on (date), was waived, or is not required. Provide supporting documentation if consultation has been waived or if good faith effort did not result in consultation.

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:

Permit Number: Expiration Date:

API NUMBER 05-

CONDITIONS OF APPROVAL, IF ANY: