

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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Document Number:

1808678

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: SAMSON RESOURCES COMPANY 4. COGCC Operator Number: 76104

5. Address: TWO WEST SECOND ST  
City: TULSA State: OK Zip: 74103

6. Contact Name: JULIE DOSSEY Phone: (970)382-0027 Fax: (970)382-0290  
Email: JDOSSEY@TIMBERLINELAND.COM

7. Well Name: SOUTHERN UTE 32-7-9 Well Number: 6

8. Unit Name (if appl): \_\_\_\_\_ Unit Number: \_\_\_\_\_

9. Proposed Total Measured Depth: 3474

WELL LOCATION INFORMATION

10. QtrQtr: SWSE Sec: 9 Twp: 32N Rng: 7W Meridian: N

Latitude: 37.027240 Longitude: -107.612510

Footage at Surface: 1118 FNL/FSL FSL 2184 FEL/FWL FEL

11. Field Name: IGNACIO BLANCO Field Number: 38300

12. Ground Elevation: 6242 13. County: LA PLATA

14. GPS Data:

Date of Measurement: 06/27/2006 PDOP Reading: 3.0 Instrument Operator's Name: SCOTT WIEBE

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

Footage at Top of Prod Zone: FNL/FSL 1473 FSL 1273 FEL 1560 FEL/FWL 1050 FEL 1050 FEL

Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_ Sec: 9 Twp: 32N Rng: 7W

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: 528

18. Distance to nearest property line: 528 19. Distance to nearest well permitted/completed in the same formation: 1320

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.)
FRUITLAND COAL	FRLDC	112-181	320	S2

21. Mineral Ownership:  Fee  State  Federal  Indian Lease #: 14-20-151-39

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):  
LEASE IS ATTACHED

25. Distance to Nearest Mineral Lease Line: 1050 26. Total Acres in Lease: 80

### 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: EVAPORATIVE RESERVE

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	350	220	350	0
1ST	7+7/8	5+1/2	17	3,474	570	3,473	0

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

33. Comments ALL CONDITIONS REMAIN THE SAME SA PER THE ORIGINAL SUBMITTAL. NO CONDUCTOR CASING WILL BE USED FOR THIS WELL.

34. Location ID: \_\_\_\_\_

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: JULIE DOSSEY

Title: PERMITTING AGENT Date: \_\_\_\_\_ Email: JDOSSEY@TIMBERLINELAN

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: \_\_\_\_\_

<b>API NUMBER</b> 05 067 09248 00	Permit Number: _____ Expiration Date: _____
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**CONDITIONS OF APPROVAL, IF ANY:** \_\_\_\_\_

### **Attachment Check List**

Att Doc Num	Name	Doc Description
1808678	APD ORIGINAL	LF@2170392 1808678

Total Attach: 1 Files