

FORM
2Rev
12/05State 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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APPLICATION FOR PERMIT TO:

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

2. TYPE OF WELL

OIL ☒ GAS ☐ COALBED ☐ OTHER _____
SINGLE ZONE ☒ MULTIPLE ☐ COMMINGLE ☐Refiling ☐
Sidetrack ☐

Document Number:

400127702

Plugging Bond Surety

20100114

3. Name of Operator: GULFPORT ENERGY CORPORATION

4. COGCC Operator Number: 10339

5. Address: 14313 N. MAY AVENUE - SUITE 100

City: OKLAHOMA CITY State: OK Zip: 73134

6. Contact Name: David Segobia Phone: (405)242-4977 Fax: (405)848-8816

Email: dsegobia@gulfportenergy.com

7. Well Name: STATE Well Number: 41-14-1

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

9. Proposed Total Measured Depth: 8300

WELL LOCATION INFORMATION

10. QtrQtr: Lot 13 Sec: 14 Twp: 6N Rng: 91W Meridian: 6

Latitude: 40.472404 Longitude: -107.577962

Footage at Surface: 698 feet FNL/FSL FSL 918 feet FEL/FWL FWL

11. Field Name: Craig Field Number: 13500

12. Ground Elevation: 6340.8 13. County: MOFFAT

14. GPS Data:

Date of Measurement: 04/30/2011 PDOP Reading: 2.4 Instrument Operator's Name: D. Spurlock

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

Footage at Top of Prod Zone: FNL/FSL FEL/FWL Bottom Hole: FNL/FSL FEL/FWL

Sec: Twp: Rng: Sec: Twp: Rng:

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: 355 ft

18. Distance to nearest property line: 189 ft 19. Distance to nearest well permitted/completed in the same formation: 9363 ft

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.)
Niobrara	NBRR	318a	40	S/2

21. Mineral Ownership: ☐ Fee ☒ State ☐ Federal ☐ Indian Lease #: 8582.522. Surface Ownership: ☐ Fee ☒ State ☐ Federal ☐ Indian23. Is the Surface Owner also the Mineral Owner? ☒ Yes ☐ No Surface Surety ID#: 2010011323a. If 23 is Yes: Is the Surface Owner(s) signature on the lease? ☒ Yes ☐ No23b. If 23 is ☐ Surface Owners Agreement Attached or ☐ \$25,000 Blanket Surface Bond ☐ \$2,000 Surface Bond ☐ \$5,000 Surface Bond

24. Using standard COGCC, Sec, Twp, Rng format enter entire mineral lease description upon which this proposed wellsite is located (attach separate sheet/map if you prefer):

25. Distance to Nearest Mineral Lease Line: 698 ft

26. Total Acres in Lease: 614

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 28 or 29 are yes, is this location in a sensitive area (Rule 901.e)? ☐ Yes ☒ No

31. Mud disposal: ☐ Offsite ☒ Onsite

If 28, 29, or 30 are "Yes" a pit permit may be required.

Method: ☐ Land Farming ☐ Land Spreading ☐ Disposal Facility Other: Evaporative pit method

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	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
SURF	12+1/4	9+5/8	36/ft	0	625	381	625	0
1ST	8+3/4	7+0/0	23/ft	625	6,523	243	6,523	625
1ST LINER	6+1/8	4+1/2	0	6523	8,300	0	0	0

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

33. Comments Rotating head will be utilized if a surface hole drilling rig equipped to drill with air/air mist is used to preset surface casing. See Drilling plan for BOP plan below Surface casing to TD. Operator is permitting a pilot producible well at this time. Future plans are to permit a horizontal well into the same formation upon approval of a new spacing order from the Commision. 4 1/2" Slotted liner will be installed from 6325 to TD

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: Brendan Cusick

Title: Agent for Gulfport Date: _____ Email: btcusick@prymorysenviron.com

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

Permit Number: _____ Expiration Date: _____

CONDITIONS OF APPROVAL, IF ANY:

All representations, stipulations and conditions of approval stated in the Form 2A for this location shall constitute representations, stipulations and conditions of approval for this Form 2 Permit-to-Drill and are enforceable to the same extent as all other representations, stipulations and conditions of approval stated in this Permit-to-Drill.

Attachment Check List

Att Doc Num	Name
400165999	LEGAL/LEASE DESCRIPTION
400167372	DRILLING PLAN
400167374	WELL LOCATION PLAT

Total Attach: 3 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)

BMP

<u>Type</u>	<u>Comment</u>

Total: 0 comment(s)