

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



DE ET OE ES

Document Number:

1712924

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: YATES PETROLEUM CORPORATION 4. COGCC Operator Number: 97810

5. Address: 105 SOUTH 4TH ST

City: ARTESIA State: NM Zip: 88210

6. Contact Name: WILL C. RUSSELL Phone: (307)382-4005 Fax: (307)382-5923

Email: REGULATORY

7. Well Name: BIG HOLE GULCH UNIT #3 Well Number: #3

8. Unit Name (if appl): BIG HOLE GULCH Unit Number: COC72464X

9. Proposed Total Measured Depth: 9805

WELL LOCATION INFORMATION

10. QtrQtr: NWSE Sec: 8 Twp: 11N Rng: 94W Meridian: 6

Latitude: 40.926172 Longitude: -107.970750

Footage at Surface: 1980 FNL/FSL FSL 1980 FEL/FWL FEL

11. Field Name: WILDCAT Field Number: 99999

12. Ground Elevation: 6581.5 13. County: MOFFAT

14. GPS Data:

Date of Measurement: 04/29/2009 PDOP Reading: 2.1 Instrument Operator's Name: ANDY FLOYD

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: 1787

18. Distance to nearest property line: 1980 19. Distance to nearest well permitted/completed in the same formation: 1930

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.)
LEWIS	LWIS			
MESAVERDE	MVRD			

21. Mineral Ownership: Fee State Federal Indian Lease #: COC61491

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):
SECTION 8 T11N R94W ALL, SECTION 9 T11N R94W E1/2, W1/2NW

25. Distance to Nearest Mineral Lease Line: 1980 26. Total Acres in Lease: 1040

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: RESERVE PIT

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	11	8+5/8	J55	1,100	400	1,100	0
1ST	7+7/8	4+1/2	11.6	9,805	975	9,805	0

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

33. Comments _____

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: WILL C. RUSSELL

Title: REGULATORY Date: _____ Email: WILLR@YATESPETROLEUM.

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	Permit Number: _____	Expiration Date: _____
05	CONDITIONS OF APPROVAL, IF ANY:	

Attachment Check List

Att Doc Num	Name	Doc Description
1712924	APD ORIG & 1 COPY	LF@2155186 1712924
1712925	WELL LOCATION PLAT	LF@2155187 1712925
1712926	TOPO MAP	LF@2155188 1712926
1712927	LEASE MAP	LF@2155189 1712927
1712928	FED. DRILLING PERMIT	LF@2155190 1712928
1712929	DRILLING PLAN	LF@2155191 1712929
1712930	SURFACE PLAN	LF@2155192 1712930

Total Attach: 7 Files