

FORM  
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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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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

Document Number:  
1784309  
Plugging Bond Surety  
20090067

3. Name of Operator: WIEPKING-FULLERTON ENERGY LLC 4. COGCC Operator Number: 96340

5. Address: 4600 S DOWNING ST  
City: ENGLEWOOD State: CO Zip: 80113

6. Contact Name: JACKFINCHAM Phone: (303)906-3335 Fax: (303)798-6542  
Email: FINCHAM4@MSN.COM

7. Well Name: STEWART Well Number: A-1

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

9. Proposed Total Measured Depth: 5670

WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 1 Twp: 15S Rng: 50W Meridian: 6

Latitude: 38.776360 Longitude: -102.958230

Footage at Surface: 606 FNL/FSL FNL 609 FEL/FWL FWL

11. Field Name: WILDCAT Field Number: 99999

12. Ground Elevation: 4396.66 13. County: CHEYENNE

14. GPS Data:

Date of Measurement: 06/12/2009 PDOP Reading: 1.8 Instrument Operator's Name: KEITH WESTFALL

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: 4685

18. Distance to nearest property line: 606 19. Distance to nearest well permitted/completed in the same formation: 36960

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.)
CHEROKEE	CHRK			
MARMATON	MRTN			

21. Mineral Ownership:  Fee  State  Federal  Indian Lease #: \_\_\_\_\_

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):  
 SEC 1: ALL, T15S, R50W

25. Distance to Nearest Mineral Lease Line: 606 26. Total Acres in Lease: 640

**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: \_\_\_\_\_

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	425	250	425	
1ST	7+7/8	5+1/2	17	4,900	300	4,900	3,400

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

33. Comments NO CONDUCTOR CASING WILL BE USED

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: JACK M FINCHAM

Title: AGENT Date: 9/1/2009 Email: FINCHAM4@MSN.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: David S. Nashin Director of COGCC Date: 10/6/2009

**API NUMBER**  
 05 017 06709 00

Permit Number: \_\_\_\_\_ Expiration Date: 10/5/2010

**CONDITIONS OF APPROVAL, IF ANY:** \_\_\_\_\_

## Condition of Approval

Comment

Agency

1) Provide 24 hour notice of MIRU to Mike Leonard at 719-767-2805 or e-mail at mike.leonard@ state.co.us. 2) If production casing is set provide cement coverage to at least 200' above top potentially productive zone, and stage cement from 50' below Cheyenne to 50' above Dakota (est. 2220'-1530'). Run CBL to verify primary and stage cement jobs. 3) If well is a dry hole set the following plugs: 40 sks cement at TD, 40 sks cement 50' above the Marmaton, 40 sks cement above any DST zone, 40 sks cement 50' below base of Cheyenne (est. 2220' up), 40 sks cement at top of Cheyenne (est. 1900' up), 40 sks cement 50' above top of Dakota (est. 1530' up), 50 sks cement from 50' below surface casing shoe up into surface casing, 10 sks cement in top of surface csg, cut 4 ft below GL, weld on plate, 5 sks cement in rat hole and mouse hole.

## Attachment Check List

Att Doc Num	Name	Doc Description
1784309	APD ORIGINAL	LF@2136932 1784309
1784310	WELL LOCATION PLAT	LF@2136933 1784310
1784311	TOPO MAP	LF@2136934 1784311
1784312	SURFACE AGRMT/SURETY	LF@2136935 1784312
1784313	30 DAY NOTICE LETTER	LF@2136936 1784313
1940676	SURFACE CASING CHECK	LF@2147265 1940676

Total Attach: 6 Files