

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:

400009640

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: TEXAS AMERICAN RESOURCES COMPANY4. COGCC Operator Number: 101385. Address: 410 17TH STREET SUITE 1610City: DENVER State: CO Zip: 802026. Contact Name: Melissa Lasley Phone: (720)279-6805 Fax: (303)592-3030Email: mlasley@texasarc.com7. Well Name: Sauvage Well Number: 12-7

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

9. Proposed Total Measured Depth: 9100

WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 7 Twp: 1S Rng: 67W Meridian: 6Latitude: 39.942600 Longitude: -104.937470
 Footage at Surface: 762 FNL/FSL FNL 777 FEL/FWL FWL
11. Field Name: SPINDLE Field Number: 7790012. Ground Elevation: 5120 13. County: ADAMS

14. GPS Data:

Date of Measurement: 06/22/2009 PDOP Reading: 2.0 Instrument Operator's Name: Steven Lund15. If well is ☒ Directional ☐ Horizontal (highly deviated) **submit deviated drilling plan.**
 Footage at Top of Prod Zone: FNL/FSL 1970 FNL 619 FWL 1970 FNL 619 FWL 1970 FNL 619 FWL
 Bottom Hole: FNL/FSL 1970 FNL 619 FWL 1970 FNL 619 FWL
 Sec: 7 Twp: 1S Rng: 67W Sec: 7 Twp: 1S Rng: 67W
16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 29218. Distance to nearest property line: 762 19. Distance to nearest well permitted/completed in the same formation: 65

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.)
J Sand	JSND	232-23	320	N/2
Dakota	DKTA	499-15	320	N/2
Niobrara Codell	NB-CK	407-87	80	W/2 NW

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):
SUA is apart of the lease. lease is attaced

25. Distance to Nearest Mineral Lease Line: 762 26. Total Acres in Lease: 20

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: TBD

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
1ST	12+1/4	8+8/8	24#	1,400	650	1,400	700
2ND	7+7/8	4+1/2	11.6#	9,000	350	9,000	7,000
S.C. 2.1				5,300		5,300	3,800

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: Melissa Lasley

Title: Analyst Date: 10/14/2009 Email: mlasley@texasarc.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

05 001 09568 00

Permit Number: _____ Expiration Date: _____

CONDITIONS OF APPROVAL, IF ANY: _____

Attachment Check List

Att Doc Num	Name	Doc Description
400009785	OIL & GAS LEASE	Lease.pdf
400009786	DEVIATED DRILLING PLAN	Directional.pdf
400010733	WELL LOCATION PLAT	Sauvage 12-7_PL.pdf

Total Attach: 3 Files