

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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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:
1758942
Plugging Bond Surety
20080082

3. Name of Operator: LEGADO DJ, LLC 4. COGCC Operator Number: 200039

5. Address: 25211 GROGANS MILL RD STE 465
City: THE WOODLANDS State: TX Zip: 77380

6. Contact Name: JENNIFERRADLE Phone: (832)482-3916 Fax: (832)482-3935
Email: JENNIFER.RADLE@LEGADORESOURCE.COM

7. Well Name: MOUNT HOPE-GREEN Well Number: 26

8. Unit Name (if appl): MOUNT HOPE Unit Number: 089552

9. Proposed Total Measured Depth: 7802

WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 30 Twp: 9N Rng: 53W Meridian: 6
Latitude: 40.731010 Longitude: -103.341880

Footage at Surface: 330 FNL/FSL FNL 992 FEL/FWL FWL

11. Field Name: MOUNT HOPE Field Number: 56150

12. Ground Elevation: 4185 13. County: LOGAN

14. GPS Data:

Date of Measurement: 07/15/2009 PDOP Reading: 2.5 Instrument Operator's Name: DARREN VEAL

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: 312 ft

18. Distance to nearest property line: 111 ft 19. Distance to nearest well permitted/completed in the same formation: _____

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.)
MUDDY D	MDDYD	22-3		

21. Mineral Ownership: Fee State Federal Indian Lease #: 065291

22. Surface Ownership: Fee State Federal Indian

23. Is the Surface Owner also the Mineral Owner? Yes No Surface Surety ID#: 20080083

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):
 ENTIRE SECTION 30 OF 9N-R53W-6PM

25. Distance to Nearest Mineral Lease Line: 330 ft 26. Total Acres in Lease: 736

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		10+3/4	40	501			
1ST		5+1/2	15.5	5,024			

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: JENNIFER RADLE

Title: TECHNICAL ASST Date: 9/3/2009 Email: JENNIFER.RADLE@LEGADO

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: 11/17/2009

API NUMBER
 05 075 06364 00

Permit Number: _____ Expiration Date: 11/16/2010

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.

1) Provide 24 hour notice of MIRU to Colby Horton at 970-467-2517 or e-mail at colby.horton@state.co.us.. 2) After drilling out surface plug, pressure test production casing to the anticipated formation pressure to verify production casing integrity . 3) If completed, provide stage cement on production casing from 800' up to 50' above surface casing shoe. Also, provide cmt coverage from TD to a minimum of 200' above D-sand. Verify all cement coverage with cement bond log.

Attachment Check List

Att Doc Num	Name	Doc Description
1758942	APD ORIGINAL	LF@2138486 1758942
1758952	WELL LOCATION PLAT	LF@2138487 1758952
1758953	30 DAY NOTICE LETTER	LF@2138488 1758953
1940938	SURFACE CASING CHECK	LF@2162513 1940938

Total Attach: 4 Files