

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:

1774256

Plugging Bond Surety

20090053

3. Name of Operator: RUNNING FOXES PETROLEUM INC 4. COGCC Operator Number: 102215. Address: 7060 SOUTH TUCSON WAY - STE BCity: CENTENNIAL State: CO Zip: 801126. Contact Name: MONTE MADSEN Phone: (720)889-0510 Fax: (303)617-7442Email: MMADSEN@ATOKA.COM7. Well Name: JOLLY RANCH Well Number: 4-12

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

9. Proposed Total Measured Depth: 8000

## WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 12 Twp: 13S Rng: 56W Meridian: 6Latitude: 38.936490 Longitude: -103.624530
 Footage at Surface: 660 FNL/FSL FNL 660 FEL/FWL FWL
11. Field Name: WILDCAT Field Number: 9999912. Ground Elevation: 5205 13. County: LINCOLN

## 14. GPS Data:

Date of Measurement: 02/12/2008 PDOP Reading: 2.2 Instrument Operator's Name: ROBERT J. RUBINO15. 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 ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 5861 ft18. Distance to nearest property line: 660 ft 19. Distance to nearest well permitted/completed in the same formation: 1270 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.)
CHEROKEE	CHRK			
MARMATON	MRTN			
MORROW	MRRW			
SPERGEN	SPGN			

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#: 20070088

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):  
ALL OF SECTION 12, T13S-R56W (PLUS ADDITIONAL)

25. Distance to Nearest Mineral Lease Line: 4633 ft 26. Total Acres in Lease: 18

### 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: EVAP. & BURY

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	17+1/2	13+3/8	48	400	253	400	0
1ST	7+7/8	5+1/2	17	8,000	497	8,000	2,500

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

33. Comments ALL CONDITIONS SAME AS ORIGINAL. NO CONDUCTOR CASING WILL BE USED. #19 ABOVE: 1320' WEST OF JOLLY RANCH 3-12. FROM #25 ABOVE: DISTGANCE FROM SEC. 13, T13S-R56W.

34. Location ID: 309627

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: STEVEN A. TEDESCO

Title: PRESIDENT Date: 11/23/2009 Email: STEDESCO@RUNNINGFOX

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: \_\_\_\_\_

<b>API NUMBER</b> 05 073 06328 00	Permit Number: _____ Expiration Date: _____
<b>CONDITIONS OF APPROVAL, IF ANY:</b>	

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	Doc Description
1774256	APD ORIGINAL	LF@2183661 1774256
1774257	WELL LOCATION PLAT	LF@2183662 1774257
1774258	TOPO MAP	LF@2183663 1774258
1774259	MINERAL LEASE MAP	LF@2178773 1774259
400017514	FORM 2 SUBMITTED	400017514.pdf

Total Attach: 5 Files