

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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Document Number:

1774981

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: SAMSON RESOURCES COMPANY

4. COGCC Operator Number: 76104

5. Address: TWO WEST SECOND ST

City: TULSA State: OK Zip: 74103

6. Contact Name: JULIE DOSSEY Phone: (970)382-0027 Fax: (970)382-0290

Email: JDOSSEY@TIMBERLINELAND.COM

7. Well Name: UTE 33-7-25

Well Number: 8

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

9. Proposed Total Measured Depth: 3537

WELL LOCATION INFORMATION

10. QtrQtr: NESW Sec: 25 Twp: 33N Rng: 7W Meridian: N

Latitude: 37.074420 Longitude: -107.563610

FNL/FSL

FEL/FWL

Footage at Surface: 2399 FSL 1539 FWL

11. Field Name: IGNACIO BLANCO Field Number: 38300

12. Ground Elevation: 6370 13. County: LA PLATA

14. GPS Data:

Date of Measurement: 12/08/2009 PDOP Reading: 0.0 Instrument Operator's Name: JPS

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

1417 FSL 887 FWL 1075 FSL 660 FWL

Sec: Twp: Rng: Sec: 25 Twp: 33N Rng: 7W

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: 0 mi

18. Distance to nearest property line: 1539 ft 19. Distance to nearest well permitted/completed in the same formation: 1320 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.)
FRUITLAND COAL	FRLDC	112-181	320	W2

21. Mineral Ownership: ☐ Fee ☐ State ☐ Federal ☒ Indian Lease #: I-22-IND-2803

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):
TWO LEASES ATTACHED

25. Distance to Nearest Mineral Lease Line: 887 ft 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: EVAPORATIVE RESERVE

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	350	220	350	0
1ST	7+7/8	5+1/2	17	3,537	570	3,537	0

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

33. Comments BOTH BOXES ARE CHECKED IN #21 AS N2SW IS FEE MINERALS, AND THE S2SW IS INDIAN MINERALS. NO CONDUCTOR CASING WILL BE USED. NOTHING HAS CHANGED FROM THE ORIGINAL APD SUBMITTAL.

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: JULIE DOSSEY

Title: PERMITTING AGENT Date: _____ Email: JDOSSEY@TIMBERLINELAN

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 05 067 09240 00	Permit Number: _____ Expiration Date: _____
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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.

Attachment Check List

Att Doc Num	Name	Doc Description
1774981	APD ORIGINAL	LF@2192715 1774981

Total Attach: 1 Files