

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:

1759819

Plugging Bond Surety

20010023

3. Name of Operator: K P KAUFFMAN COMPANY INC4. COGCC Operator Number: 462905. Address: 1675 BROADWAY, STE 2800City: DENVER State: CO Zip: 802026. Contact Name: SHERRY GLASS Phone: (303)825-4822 Fax: (303)825-4825Email: SGLASS@KPK.COM7. Well Name: WESTERN Well Number: 5-16-32R

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

9. Proposed Total Measured Depth: 7962

WELL LOCATION INFORMATION

10. QtrQtr: SWNW Sec: 16 Twp: 4N Rng: 66W Meridian: 6Latitude: 40.313540 Longitude: -104.789730
 Footage at Surface: 1957 FNL/FSL FNL 612 FEL/FWL FWL
11. Field Name: WATTENBERG Field Number: 9075012. Ground Elevation: 4737 13. County: WELD

14. GPS Data:

Date of Measurement: 06/19/2007 PDOP Reading: 5.9 Instrument Operator's Name: KIPPER GOLDSBERRY15. If well is ☒ Directional ☐ Horizontal (highly deviated) **submit deviated drilling plan.**
 Footage at Top of Prod Zone: FNL/FSL 2487 FNL 160 FWL 2487 FNL 160 FWL
 Bottom Hole: FNL/FSL 2487 FNL 160 FWL
 Sec: _____ Twp: _____ Rng: _____ Sec: 16 Twp: 4N Rng: 66W
16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 612 ft18. Distance to nearest property line: 612 ft 19. Distance to nearest well permitted/completed in the same formation: 729 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.)
J SAND	JSND	GWA	160	
NIOBRARA-CODELL	NB-CD	GWA	160	

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#: 20010024

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):
S2NW SECTION 16-T4N-R66W

25. Distance to Nearest Mineral Lease Line: 160 ft 26. Total Acres in Lease: 80

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	460	325	460	0
1ST	7+7/8	4+1/2	11.5	7,962	750	7,962	

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

33. Comments NO CONDUCTOR CASING WILL BE USED, CONSULTATION WITH SURFACE OWNER BEFORE 11/30/09. OFFSET FROM GENESIS #1.

34. Location ID: 336595

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: SHERRY GLASS

Title: ENG TECH Date: _____ Email: SGLASS@KPK.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: _____

Permit Number: _____ Expiration Date: _____

API NUMBER

05

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
1759819	APD ORIGINAL	LF@2184568 1759819
1759829	WELL LOCATION PLAT	LF@2184570 1759829
1759830	TOPO MAP	LF@2184572 1759830
1759831	MINERAL LEASE MAP	LF@2184633 1759831
1759832	30 DAY NOTICE LETTER	LF@2184574 1759832
1759833	DEVIATED DRILLING PLAN	LF@2184576 1759833
1759834	PROPOSED SPACING UNIT	LF@2184578 1759834
1759835	PROPOSED SPACING UNIT	LF@2184631 1759835

Total Attach: 8 Files