

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:

2105107

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: RUNNING FOXES PETROLEUM INC4. COGCC Operator Number: 102215. Address: 7060 SOUTH TUCSON WAY - STE BCity: CENTENNIAL State: CO Zip: 801126. Contact Name: STEVEN A TEDESCO Phone: (720)889-0510 Fax: (303)617-7442Email: STEDESCO@RUNNINFOXES.COM7. Well Name: CRAIG Well Number: 10-32

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

9. Proposed Total Measured Depth: 8000

WELL LOCATION INFORMATION

10. QtrQtr: NWSE Sec: 32 Twp: 13S Rng: 55W Meridian: 6Latitude: 38.870790 Longitude: -103.578040
 Footage at Surface: 1980 FNL/FSL FSL FEL/FWL 1980 FEL FEL
11. Field Name: WILDCAT Field Number: 9999912. Ground Elevation: 5105 13. County: LINCOLN

14. GPS Data:

Date of Measurement: 03/19/2009 PDOP Reading: 1.8 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: 3350 ft18. Distance to nearest property line: 660 ft 19. Distance to nearest well permitted/completed in the same formation: 1612 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.)
ARBUCKLE	ABCK			
MISSISSIPPIAN	MSSP			
PENNSYLVANIAN	PENN			

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#: 2007

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):
S2, E2NE, S2NW, NWNW OF SECTION 32, T13S-R55W(PLES ADDITIONAL)

25. Distance to Nearest Mineral Lease Line: 660 ft 26. Total Acres in Lease: 11460

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+24/64	48	400	350	400	
1ST	8+3/25	7	26	8,000	500	8,000	3,100

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

33. Comments #19 ABOVE: 1612' TO CRAIG 15-32/ NO CONDUCTER CADING WILL BE USED #18 & #25 ABOVE: DISTANCE TO STATE LAND IN SAME SECTION (SEE MINERAL LEASE MAP)

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: STEVEN A TEDESCO

Title: PRESIDENT Date: _____ 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: _____

API NUMBER

05

Permit Number: _____ Expiration Date: _____

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
2105107	APD ORIGINAL	LF@2207162 2105107
2105108	WELL LOCATION PLAT	LF@2207163 2105108
2105109	TOPO MAP	LF@2207164 2105109
2105110	MINERAL LEASE MAP	LF@2207207 2105110
2105111	30 DAY NOTICE LETTER	LF@2207165 2105111

Total Attach: 5 Files