

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:
2094239
Plugging Bond Surety
19820016

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: IGNACIO 33-7-32 Well Number: 7

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

9. Proposed Total Measured Depth: 3439

WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 32 Twp: 33N Rng: 7W Meridian: N
Latitude: 37.064370 Longitude: -107.637710

Footage at Surface: 1290 FNL/FSL FNL 1060 FEL/FWL FWL

11. Field Name: IGNACIO BLANCO Field Number: 38300

12. Ground Elevation: 6395 13. County: LA PLATA

14. GPS Data:

Date of Measurement: 08/23/2006 PDOP Reading: 1.4 Instrument Operator's Name: KENNETH WERITO SR.

15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL FNL 808 FNL 1971 FWL 660 FNL 2250 FWL
Sec: 32 Twp: 33N Rng: 7W Sec: 32 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: 6230 ft

18. Distance to nearest property line: 1060 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	N/2

21. Mineral Ownership: Fee State Federal Indian Lease #: 14201514

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):
SEE ATTACHED

25. Distance to Nearest Mineral Lease Line: 660 ft 26. Total Acres in Lease: 1845

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: RESERVE PIT-EVAPORAT

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	258	350	0
1ST	7+7/8	5+1/2	17	3,439	214	3,439	0

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

33. Comments **NO CONDUCTOR CASING WILL BE USED. THERE ARE NO CHANGES SINCE THE ORIGINAL SUBMITTAL. INTERIM POLICY REQUIREMENTS ARE NOT APPLICABLE AS THE WELL IS LOCATED ON TRIBAL SURFACE.**

34. Location ID: 333850

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: PERMITS Date: 1/14/2010 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: David S. Nashin Director of COGCC Date: 2/11/2010

API NUMBER
05 067 09297 00

Permit Number: _____ Expiration Date: 2/10/2011

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
1857087	SELECTED ITEMS REPORT	LF@2219218 1857087
2094239	APD ORIGINAL	LF@2212481 2094239
400028822	FORM 2 SUBMITTED	LF@2218610 400028822

Total Attach: 3 Files