

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:
400052611
Plugging Bond Surety
20010023

3. Name of Operator: K P KAUFFMAN COMPANY INC 4. COGCC Operator Number: 46290

5. Address: 1675 BROADWAY, STE 2800
City: DENVER State: CO Zip: 80202

6. Contact Name: Sherry Glass Phone: (303)825-4822 Fax: (303)825-4825
Email: sglass@kpk.com

7. Well Name: RML Well Number: #12-8-33

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

9. Proposed Total Measured Depth: 7600

WELL LOCATION INFORMATION

10. QtrQtr: NWSW Sec: 8 Twp: 4N Rng: 66W Meridian: 6
Latitude: 40.325000 Longitude: -104.809070

Footage at Surface: 2143 FNL/FSL FSL 741 FEL/FWL FWL

11. Field Name: Wattenberg Field Number: 90750

12. Ground Elevation: 4713 13. County: WELD

14. GPS Data:

Date of Measurement: 12/12/2006 PDOP Reading: 1.8 Instrument Operator's Name: J. Rhoten

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

Footage at Top of Prod Zone: FNL/FSL 1531 FSL 160 FWL _____ FEL/FWL 1531 FSL 160 FWL _____
Sec: 8 Twp: 4N Rng: 66W Sec: 8 Twp: 4N Rng: 66W

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: 237 ft

18. Distance to nearest property line: 741 ft 19. Distance to nearest well permitted/completed in the same formation: 25 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.)
Codell	CODL	407-87	160	E/2SE/4 sec 7
Niobrara	NBRR	407-87	160	W/2SW/4 sec 8;

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):
S/2NW/4,W/2SW/4,NE/4SW/4 and a certain tract of land in the southwest corner of NW/4NE/4 section 8-T4N-R66W

25. Distance to Nearest Mineral Lease Line: 160 ft 26. Total Acres in Lease: 217

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#	400	325	400	
1ST	7+7/8	4+1/2	11.5#	7,600	600	7,600	

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

33. Comments Conductor casing will be used. Surface use agreement attached. Twinned to Edkam #3-28 API#05-123-11889. Associated tank battery will service EdKam #3-28, RML #12-8-19 and #12-8-33. Formerly numbered as #8-13-A1.

34. Location ID: 332569

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: Engineering Technician Date: 4/6/2010 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
05 123 24830 01

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
400052617	PLAT	RML 12-8-33 PLAT.pdf
400052618	TOPO MAP	RML 12-8-33 TOPO.pdf
400052619	LEASE MAP	RML #12-8-33 Lease Map.pdf
400052620	UNIT CONFIGURATION MAP	RML #12-8-33 Unit Plat.pdf
400052621	DEVIATED DRILLING PLAN	Directional plan.pdf
400052625	30 DAY NOTICE LETTER	surface notice_RML 12-8-33.pdf
400052627	PROPOSED SPACING UNIT	offset operator notice RML #12-8-33.pdf
400052632	SURFACE AGRMT/SURETY	Fully Exec SUA_RML.pdf
400052648	OTHER	RML 8-13-A1 approved permit to drill.pdf

Total Attach: 9 Files