

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 HORIZONTAL
SINGLE ZONE MULTIPLE ZONE COMMINGLE ZONE

Refiling
Sidetrack

Document Number:
2581001
Plugging Bond Surety
20090003

3. Name of Operator: RUBICON OIL & GAS LLC 4. COGCC Operator Number: 10303

5. Address: 508 W WALL AVE STE 500
City: MIDLAND State: TX Zip: 79701

6. Contact Name: KYLE HUDSON Phone: (303)595-7626 Fax: (303)595-7628
Email: KHUDSON@RPM-INC.ORG

7. Well Name: PAWNEE Well Number: 2-16-1

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

9. Proposed Total Measured Depth: 11697

WELL LOCATION INFORMATION

10. QtrQtr: SESE Sec: 16 Twp: 9N Rng: 67W Meridian: 6
Latitude: 40.741178 Longitude: -104.889484

Footage at Surface: 300 FNL/FSL FSL 700 FEL/FWL FEL

11. Field Name: WILDCAT Field Number: 99999

12. Ground Elevation: 5496.2 13. County: WELD

14. GPS Data:

Date of Measurement: 02/25/2010 PDOP Reading: 1.3 Instrument Operator's Name: DJM

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

Footage at Top of Prod Zone: FNL/FSL 757 FSL 838 FEL 650 FEL/FWL 1990 FEL
Sec: 16 Twp: 9N Rng: 67W Sec: 16 Twp: 9N Rng: 67W

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: 320 ft

18. Distance to nearest property line: 300 ft 19. Distance to nearest well permitted/completed in the same formation: 5280 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.)
NIOBRARA	NBRR		640	

21. Mineral Ownership: Fee State Federal Indian Lease #: 8686.5

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):
T9N-R67W: SEC 16: ALL

25. Distance to Nearest Mineral Lease Line: 300 ft 26. Total Acres in Lease: 640

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	9+5/8	36	850	425	850	0
1ST	8+3/4	7	26	7,713	350	7,713	4,000
3RD	6+1/8	4+1/2	11.6	11,697			
1ST LINER	6+1/8	4+1/2	11.6	11,697			

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

33. Comments **NO CONDUCTOR CASING WILL BE SET. DISTANCE TO WELL PERMITTED IN THE SAME FORMATION IS MORE THAN ONE MILE**

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: KYLE HUDSON

Title: PRESIDENT-RPM CONSULTING Date: 3/5/2010 Email: KHUDSON@RPM-INC.ORG

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. Neslin Director of COGCC Date: 4/13/2010

Permit Number: _____ Expiration Date: 4/12/2012

API NUMBER
05 123 31432 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.

1) Note surface casing setting depth change from 800' to 850'. Increase cement coverage accordingly. 2) Provide 24 hour notice of MIRU to Ed Binkley at 970-506-9834 or e-mail at ed.binkley@state.co.us 3) Comply with Rule 317.i and provide cement coverage from TD to a minimum of 200' above Niobrara. Verify coverage with cement bond log. 4) Run and submit Directional Survey from TD to base of surface casing. The operator shall comply with Rule 321, and it shall be the operator's responsibility to ensure that the wellbore complies with setback requirements in commission orders or rules prior to producing the well.

Attachment Check List

Att Doc Num	Name	Doc Description
2581001	APD ORIGINAL	LF@2429634 2581001
2581011	WELL LOCATION PLAT	LF@2429635 2581011
2581012	TOPO MAP	LF@2429637 2581012
2581013	30 DAY NOTICE LETTER	LF@2429638 2581013
2581014	DEVIATED DRILLING PLAN	LF@2429639 2581014
400047863	FORM 2 SUBMITTED	LF@2438547 400047863

Total Attach: 6 Files