

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:

400053640

Plugging Bond Surety

20080134

3. Name of Operator: PINE RIDGE OIL & GAS LLC 4. COGCC Operator Number: 102765. Address: 600 17TH ST STE 800SCity: DENVER State: CO Zip: 802026. Contact Name: Moe Felman Phone: (303)226-1300 Fax: (303)226-1301Email: moe.felman@cometridgeresources.com7. Well Name: Buck Garrett Well Number: 12-9

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

9. Proposed Total Measured Depth: 4800

WELL LOCATION INFORMATION

10. QtrQtr: SWNW Sec: 9 Twp: 19S Rng: 69W Meridian: 6Latitude: 38.413294 Longitude: -105.123035Footage at Surface: 1560 FNL/FSL FNL 795 FEL/FWL FWL11. Field Name: Florence-Canon City Field Number: 2460012. Ground Elevation: 5252 13. County: FREMONT

14. GPS Data:

Date of Measurement: 03/18/2010 PDOP Reading: 3.0 Instrument Operator's Name: Travis Kraich15. 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 _____

1319 FSL 885 FWL 1319 FSL 885 FWLSec: 9 Twp: 19S Rng: 69W Sec: 9 Twp: 19S Rng: 69W16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 1552 ft18. Distance to nearest property line: 2563 ft 19. Distance to nearest well permitted/completed in the same formation: 2823 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.)
Pierre	Prr			

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#: 20080135

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):
Attached via PDF

25. Distance to Nearest Mineral Lease Line: _____ 26. Total Acres in Lease: 1520

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: Evaporation and Burial

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
CONDUCTOR	24	16	1/4 WT	50	70	50	
SURF	12+1/4	9+5/8	32.3 ppf	810	200	810	
1ST	8+3/4	7	23.0 ppf	3,250	25	3,800	3,050
1ST LINER	6+1/4	4+1/2	11.6 ppf	4,800			

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

33. Comments _____

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: Moe Felman

Title: Senior Operation Engineer Date: _____ Email: moe.felman@cometridgeresour

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
400053695	TOPO MAP	Buck Garrett 12-9 Topographic Map.pdf
400054024	PLAT	BUCK GARRETT 12-9 19S69W9 Well Cert.pdf
400054025	LEASE MAP	BUCK GARRETT LEASE PLAT (2).pdf
400054026	DEVIATED DRILLING PLAN	Buck Garrett 12-9_Survey Listing (Permitting)_04-08-10_Ver 2.pdf
400054027	DEVIATED DRILLING PLAN	Buck Garrett 12-9_Directional Plot_04-08-10_Ver 2.pdf
400054219	LEGAL/LEASE DESCRIPTION	Buck Garrett 12-9 Lease Description.pdf

Total Attach: 6 Files