

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:

400054206

Plugging Bond Surety

3. Name of Operator: K P KAUFFMAN COMPANY INC 4. COGCC Operator Number: 462905. Address: 1675 BROADWAY, STE 2800City: DENVER State: CO Zip: 802026. Contact Name: Sherry Glass Phone: (303)825-4822 Fax: (303)825-4825Email: sglass@kpk.com7. Well Name: Terra Well Number: #19-2

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

9. Proposed Total Measured Depth: 7825

WELL LOCATION INFORMATION

10. QtrQtr: NESW Sec: 2 Twp: 4N Rng: 66W Meridian: 6Latitude: 40.337470 Longitude: -104.749280Footage at Surface: 1380 FNL/FSL FSL 1343 FEL/FWL FWL11. Field Name: Wattenberg Field Number: 9075012. Ground Elevation: 4706 13. County: WELD

14. GPS Data:

Date of Measurement: 04/13/2010 PDOP Reading: 1.8 Instrument Operator's Name: E. Hernandez15. 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: 388 ft18. Distance to nearest property line: 316 ft 19. Distance to nearest well permitted/completed in the same formation: 806 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.)
J-Sand	JSND	232-23	320	W/2
Niobrara-Codell	NBCD	407-87	160	SW/4

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):
SW/4 section 2-T4N-R66W

25. Distance to Nearest Mineral Lease Line: 316 ft 26. Total Acres in Lease: 160

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	242	400	
1ST	7+7/8	4+1/2	11.5#	7,825	626	7,825	

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

33. Comments Surface use agreement attached. Existing footprint in associated facility will be impacted, separate form 2A for facility will be submitted later. Associated facility (Hill #1-a), located per road access and existing facility map attached to form 2A for this location. Formerly Terra #2-14-5, indicated as such on SUA, but correct in this re-numbered format to follow field numbering conventions.

34. Location ID: 306489

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: _____ 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 24779 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
400055892	PLAT	TERRA 19-2.pdf
400055894	TOPO MAP	TERRA 19-2 TOPO.pdf
400055896	LEASE MAP	Terra 19-2 lease map scanned.pdf
400055898	SURFACE AGRMT/SURETY	SUA_Great Western Ethanol-KPK_Terra wells_080529.pdf
400055899	30 DAY NOTICE LETTER	30-day notice Terra 19-2.pdf
400055904	OTHER	executed self-cert letter Terra 19-2.pdf
400055905	UNIT CONFIGURATION MAP	Terra #19-2 Unit Plat.pdf

Total Attach: 7 Files