

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:
400056429
Plugging Bond Surety

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: Venessa Langmacher Phone: (303)857-9999 Fax: (303)450-9200
Email: vlpermitco@aol.com

7. Well Name: Pawnee Well Number: 1-2-1

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

9. Proposed Total Measured Depth: 11136

WELL LOCATION INFORMATION

10. QtrQtr: Lot 4 Sec: 2 Twp: 10N Rng: 66W Meridian: 6

Latitude: 40.868409 Longitude: -104.749718

Footage at Surface: 654 FNL/FSL 1001 FEL/FWL
FNL FWL

11. Field Name: Wildcat Field Number: 99999

12. Ground Elevation: 5506.6 13. County: WELD

14. GPS Data:

Date of Measurement: 04/02/2010 PDOP Reading: 1.6 Instrument Operator's Name: GNA

15. 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
1130 FNL 959 FWL 650 FSL 650 FWL

Sec: 2 Twp: 10N Rng: 66W Sec: 2 Twp: 10N 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: 654 ft

18. Distance to nearest property line: 654 ft 19. Distance to nearest well permitted/completed in the same formation: 14256 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			
J Sand	JSND			
Niobrara	NBRR			

21. Mineral Ownership: Fee State Federal Indian Lease #: 8710.5

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):
T10N-R66W: Sec. 2: Lots 1-4, S/2 NE, W/2 SW, N/2 SE

25. Distance to Nearest Mineral Lease Line: 654 ft 26. Total Acres in Lease: 398

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
SURF	12+1/4	9+5/8	36	850	425	850	0
1ST	8+3/4	7+0/0	26	7,648	350	7,648	4,000

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: Venessa Langmacher

Title: Regulatory Supervisor Date: _____ Email: vllpermitco@aol.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: _____

API NUMBER	Permit Number: _____	Expiration Date: _____
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
400056639		Pawnee1-2-1_DirectionalPlan_Plan1_04-19-10.pdf
400056642		Pawnee1-2-1_DirectionalPlot_Plan1_04-19-10.pdf
400056645		Notice of Intent.pdf
400056648		Surface Use Agreement.pdf
400056652		Pad Layout.pdf
400056653		Plat.pdf

Total Attach: 6 Files