

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:
1697688
Plugging Bond Surety
20040050

3. Name of Operator: JETTA OPERATING COMPANY INC 4. COGCC Operator Number: 44645

5. Address: 777 TAYLOR ST STE PI-D
City: FT WORTH State: TX Zip: 76102

6. Contact Name: TERRY L. HOFFMAN Phone: (303)250-0619 Fax: (303)412-8212
Email: TLHOFFMAN@Q.COM

7. Well Name: VEDA TAYLOR Well Number: 1

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

9. Proposed Total Measured Depth: 6000

WELL LOCATION INFORMATION

10. QtrQtr: SWNW Sec: 10 Twp: 35S Rng: 43W Meridian: 6
Latitude: 37.011690 Longitude: -102.269180

Footage at Surface: 2400 FNL/FSL FNL 660 FEL/FWL FWL

11. Field Name: WILDCAT Field Number: 99999

12. Ground Elevation: 3712 13. County: BACA

14. GPS Data:

Date of Measurement: 12/08/2009 PDOP Reading: 2.3 Instrument Operator's Name: KEITH WESTFALL

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 _____

Sec: _____ Twp: _____ Rng: _____ Sec: _____ Twp: _____ Rng: _____

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: 340 ft

18. Distance to nearest property line: 660 ft 19. Distance to nearest well permitted/completed in the same formation: 6864 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.)
LANSING	LNSNG			
MORROW	MRRW			
TOPEKA	TOPK			

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#: _____

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):
 SEC 10-T35S-R43W: LOTS 2, 3, 4, 6, 8, 10, 12, 13, 14, 15, 16, 18, 19 & 21

25. Distance to Nearest Mineral Lease Line: 660 ft 26. Total Acres in Lease: 188

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
CONDUCTOR	20+16/65	16	65	60		60	0
SURF	12+1/4	8+5/8	24	1,000	492	1,000	0
1ST	7+7/8	5+1/2	15.5	6,000	537	6,000	4,500

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: TERRY L. HOFFMAN

Title: PERMIT AGENT Date: 3/19/2010 Email: TLHOFFMAN@Q.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: *David S. Neslin* Director of COGCC Date: 4/21/2010

Permit Number: _____ Expiration Date: 4/20/2012

API NUMBER
05 009 06669 00

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) Provide 24 hour notice of MIRU to Craig Quint at 719-767-8939 or e-mail at craig.quint@state.co.us 2) If production casing is set provide cement coverage to at least 200' above shallowest completed interval. Run CBL to verify all cemented intervals. 3) If well is a dry hole set plugs at the following depths: 40 sks cement +/-50' above the Morrow, 40 sks cement above any DST w/ hydrocarbon show, 40 sks cement from 50' below surface casing shoe up into surface casing, 15 sks cement at top of surface csg, cut off 4 ft below GL, weld on plate, 5 sks cement in rat hole and mouse hole.

Attachment Check List

Att Doc Num	Name	Doc Description
1697688	APD ORIGINAL	LF@2440535 1697688
1697689	WELL LOCATION PLAT	LF@2440536 1697689
1697690	TOPO MAP	LF@2440636 1697690
1697691	SURFACE AGRMT/SURETY	LF@2440537 1697691
1697692	30 DAY NOTICE LETTER	LF@2440538 1697692
1697963	WAIVERS	LF@2441052 1697963
2110263	SURFACE CASING CHECK	LF@2451475 2110263
2585978	LEASE MAP	LF@2452930 2585978

Total Attach: 8 Files