

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



DE ET OE ES

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

Refilling
Sidetrack

Document Number:
1714921
Plugging Bond Surety
20090053

3. Name of Operator: RUNNING FOXES PETROLEUM INC 4. COGCC Operator Number: 10221

5. Address: 7060 SOUTH TUCSON WAY - STE B
City: CENTENNIAL State: CO Zip: 80112

6. Contact Name: MONTE MADSEN Phone: (720)889-0510 Fax: (303)708-1861
Email: _____

7. Well Name: CRAIG Well Number: 15-32

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

9. Proposed Total Measured Depth: 7006

WELL LOCATION INFORMATION

10. QtrQtr: SWSE Sec: 32 Twp: 13S Rng: 55W Meridian: 6
Latitude: 38.866600 Longitude: -103.578070

Footage at Surface: 455 FNL/FSL FSL 2008 FEL/FWL FEL

11. Field Name: WILDCAT Field Number: 99999

12. Ground Elevation: 5112 13. County: LINCOLN

14. GPS Data:

Date of Measurement: 03/11/2009 PDOP Reading: 1.8 Instrument Operator's Name: ROBERT J. RUBINO

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

Footage at Top of Prod Zone: FNL/FSL 444 FSL 2019 FEL FEL Bottom Hole: FNL/FSL 500 FSL 1997 FEL FEL
Sec: _____ Twp: _____ Rng: _____ Sec: 32 Twp: 13S Rng: 55W

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: 1 mi

18. Distance to nearest property line: 455 ft 19. Distance to nearest well permitted/completed in the same formation: 3040 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.)
MISSISSIPPIAN	MSSP			
MORROW	MRRW			
PENNSYLVANIAN	PENN			

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#: 20070088

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):
E2NE, SE, NWNW, E2NW, SW OF SECTION 32-T13S-R55W (PLUS ADDITIONAL ACREAGE).

25. Distance to Nearest Mineral Lease Line: 2197 ft 26. Total Acres in Lease: 13166

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: PIT DRY

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	17+1/2	13+3/8	54.5	363	325	363	0
1ST	7+7/8	5+1/2	17	7,729	300	7,729	6,260
1ST LINER	4+3/4	4	11	7,006	150	7,006	6,200

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

33. Comments FROM #19 ABOVE: 3040' WNW OF CRAIG 4-4 IN SEC. 4-14S 55W. SIDETRACK REQUIRES NO ADDITIONAL DISTURBANCE OF SURFACE FROM ORIGINAL WELL SITE ACREAGE. NO CONDUCTOR CASING WILL BE USED. TOP OF TIE-BACK WILL BE 6000'. SIDETRACK REQUIRES NO ADDITIONAL DISTURBANCE OF THE SURFACE FROM ORIGINAL WELLSITE ACREAGE.

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: Y Print Name: MONTE MADSEN

Title: VP ENGINEERING Date: 6/5/2009 Email: MMADSEN@ATOKA.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: 7/10/2009

API NUMBER 05 073 06318 01	Permit Number: <u>20092604</u>	Expiration Date: <u>7/9/2011</u>
--------------------------------------	--------------------------------	----------------------------------

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
1783715	WELL LOCATION PLAT	
1783716	MINERAL LEASE MAP	
1783717	30-DAY NOTICE	
1783718	DEVIATED DRILLING PLAN	

Total Attach: 4 Files