

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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Document Number:

400009640

Plugging Bond Surety

20090100

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 ☐

3. Name of Operator: TEXAS AMERICAN RESOURCES COMPANY

4. COGCC Operator Number: 10138

5. Address: 410 17TH STREET SUITE 1610

City: DENVER State: CO Zip: 80202

6. Contact Name: Melissa Lasley Phone: (720)279-6805 Fax: (303)592-3030

Email: mlasley@texasarc.com

7. Well Name: Sauvage Well Number: 12-7

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

9. Proposed Total Measured Depth: 9100

WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 7 Twp: 1S Rng: 67W Meridian: 6

Latitude: 39.984260 Longitude: -104.937470

Footage at Surface: 762 FNL/FSL FNL 777 FEL/FWL FWL

11. Field Name: SPINDLE Field Number: 77900

12. Ground Elevation: 5120 13. County: ADAMS

14. GPS Data:

Date of Measurement: 06/22/2009 PDOP Reading: 2.0 Instrument Operator's Name: Steven Lund

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

Footage at Top of Prod Zone: FNL/FSL 1970 FNL 619 FWL FWL Bottom Hole: FNL/FSL 1970 FNL 619 FWL FWL
Sec: 7 Twp: 1S Rng: 67W Sec: 7 Twp: 1S Rng: 67W

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: 292 ft

18. Distance to nearest property line: 762 ft 19. Distance to nearest well permitted/completed in the same formation: 984 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	N/2
Dakota	DKTA	499-15	320	N/2
J Sand	JSND	232-23	320	N/2
Niobrara Codell	NB-CD	407-87	80	W/2NW4

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 Bond ☐ \$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):
SUA is apart of the lease. lease is attached

25. Distance to Nearest Mineral Lease Line: 762 26. Total Acres in Lease: 20

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: TBD

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+8/8	24#	1,400	650	1,400	700
1ST	7+7/8	4+1/2	11.6#	9,000	350	9,000	7,000
S.C. 1.1				5,300		5,300	3,800
2ND	7+7/8	4+1/2	11.6#	9,000	350	9,000	7,000
S.C. 2.1				5,300		5,300	3,800

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

33. Comments _____

34. Location ID: 335863

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: Melissa Lasley

Title: PERMITTING ANALYST Date: 10/20/2009 Email: mlasley@texasarc.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: 12/30/2009

API NUMBER

05 001 09568 00

Permit Number: _____ Expiration Date: 12/29/2011

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 Jim Precup at 303-469-1902 or e-mail at jim.precup@state.co.us 2) COMPLY WITH RULE 317.I AND PROVIDE CEMENT COVERAGE FROM TD TO A MINIMUM OF 200' ABOVE NIOBRARA AND FROM 200' BELOW SUSSEX TO 200' ABOVE SUSSEX. VERIFY COVERAGE WITH CEMENT BOND LOG. 3) COMPLY WITH RULE 321. RUN AND SUBMIT DIRECTIONAL SURVEY FROM TD TO BASE OF SURFACE CASING. ENSURE THAT THE WELLBORE COMPLIES WITH SETBACK REQUIREMENTS IN COMMISSION ORDERS OR RULES PRIOR TO PRODUCING THE WELL.

Attachment Check List

Att Doc Num	Name	Doc Description
1759687	MINERAL LEASE MAP	LF@2177490 1759687
400009785	OIL & GAS LEASE	LF@2177504 400009785
400009786	DEVIATED DRILLING PLAN	LF@2177505 400009786
400010733	WELL LOCATION PLAT	LF@2177506 400010733
400010736	FORM 2 SUBMITTED	LF@2177507 400010736

Total Attach: 5 Files