

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 SWD
SINGLE ZONE MULTIPLE ZONE COMMINGLE ZONE

Refiling
Sidetrack

Document Number:
1784326
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)617-7442
Email: MMADSEN@ATOKA.COM

7. Well Name: CRAIG Well Number: 6-4 SWD

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

9. Proposed Total Measured Depth: 8000

WELL LOCATION INFORMATION

10. QtrQtr: SENW Sec: 4 Twp: 14S Rng: 55W Meridian: 6
Latitude: 38.858920 Longitude: -103.563560

Footage at Surface: 2326 FNL/FSL FNL 2111 FEL/FWL FWL

11. Field Name: wildcat Field Number: 99999

12. Ground Elevation: 5097 13. County: LINCOLN

14. GPS Data:

Date of Measurement: 03/19/2009 PDOP Reading: 1.9 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 _____ 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: 3146 ft

18. Distance to nearest property line: 2111 ft 19. Distance to nearest well permitted/completed in the same formation: 1779 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.)
ARBUCKLE	ABCK			
CHEROKEE MORROW	CKEMW			
PENNSYLVANIAN ATOKA	PNATK			

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):
senw, sec. 4, t14s, r55w (plus additional acreage)

25. Distance to Nearest Mineral Lease Line: 3658 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	400	250	400	0
1ST	7+7/8	5+1/2	17	8,000	750	8,000	3,100

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

33. Comments FROM #19 ABOVE: CRAIG 4-4 IS 1779' TO THE NW.

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: MONTE MADSEN

Title: VP ENGINEERING Date: 9/2/2009 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. Noshin Director of COGCC Date: 10/29/2009

API NUMBER
05 073 06391 00

Permit Number: _____ Expiration Date: 10/28/2011

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 Mike Leonard at 719-767-2805 or e-mail at mike.leonard@ state.co.us. 2) Provide cement coverage to at least 200' above Cherokee, and stage cement Cheyenne Dakota (3720'-3220' minimum). Run CBL to verify primary and stage cement jobs. 3) Approval of this permit does not authorize injection. Approval of COGCC Forms 31 and 33 required prior to injection.

Attachment Check List

Att Doc Num	Name	Doc Description
1784328	WELL LOCATION PLAT	LF@2137740 1784328
1784329	TOPO MAP	LF@2137741 1784329
1784330	MINERAL LEASE MAP	LF@2137742 1784330
1784331	30 DAY NOTICE LETTER	LF@2137743 1784331
1784382	CORRESPONDENCE	LF@2142116 1784382
2097551	SURFACE CASING CHECK	LF@2157155 2097551
400014223	APD ORIGINAL	LF@2137739 400014223

Total Attach: 7 Files