

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:

400060168

Plugging Bond Surety

20080134

3. Name of Operator: PINE RIDGE OIL & GAS LLC4. COGCC Operator Number: 102765. Address: 600 17TH ST STE 800SCity: DENVER State: CO Zip: 802026. Contact Name: Moe Felman Phone: (303)226-1300 Fax: (303)226-1301Email: moe.felman@cometridgeresources.com7. Well Name: Cutthroat Well Number: 33-29

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

9. Proposed Total Measured Depth: 4330

WELL LOCATION INFORMATION

10. QtrQtr: NWSE Sec: 29 Twp: 19S Rng: 69W Meridian: 6Latitude: 38.363764 Longitude: -105.131712
 Footage at Surface: 1549 FNL/FSL FSL 1723 FEL/FWL FEL
11. Field Name: Florence-Canon City Field Number: 2460012. Ground Elevation: 5354 13. County: FREMONT

14. GPS Data:

Date of Measurement: 05/13/2010 PDOP Reading: 1.6 Instrument Operator's Name: Chris Pearson15. If well is ☐ Directional ☒ Horizontal (highly deviated) **submit deviated drilling plan.**
 Footage at Top of Prod Zone: FNL/FSL 2223 FNL 1933 FEL 2223 FNL 1933 FEL
 Bottom Hole: FNL/FSL 2223 FNL 1933 FEL
 Sec: 29 Twp: 19S Rng: 69W Sec: 29 Twp: 19S Rng: 69W
16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 611 ft18. Distance to nearest property line: 177 ft 19. Distance to nearest well permitted/completed in the same formation: 504 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.)
Pierre	Prre			

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#: 20080135

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):
See attached Lease description

25. Distance to Nearest Mineral Lease Line: _____ 26. Total Acres in Lease: 2583

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
CONDUCTOR	24	16	1/4" WT	50	70	50	
SURF	12+1/4	8+5/8	24 ppf	550	200	550	
1ST LINER	7+7/8	5+1/2	15.5	4,330			

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

33. Comments Florence Field Exception rule 318."

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: Moe Felman

Title: SeniorOperations Engineer Date: 5/19/2010 Email: moe.felman@cometridgeresour

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

05

Permit Number: _____ Expiration Date: _____

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
400060168	FORM 2 SUBMITTED	400060168.pdf
400062781	PLAT	CUTTHROAT 33-29 19S69W29 Well Cert.pdf
400062785	LEASE MAP	Cutthroat 33-29 Permit Lease Map.pdf
400062786	LEGAL/LEASE DESCRIPTION	Cutthroat 33-29 Lease Description.pdf
400062787	TOPO MAP	Lake Cut Topo.pdf
400062807	DEVIATED DRILLING PLAN	Cutthroat 33-29_Plot_04-22-10_Ver 1.pdf
400062809	DEVIATED DRILLING PLAN	Cutthroat 33-29_Directional Surveys (Permitting)_Ver 1_05-18-10.pdf

Total Attach: 7 Files