

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:

400060878

Plugging Bond Surety

20010023

3. Name of Operator: K P KAUFFMAN COMPANY INC

4. COGCC Operator Number: 46290

5. Address: 1675 BROADWAY, STE 2800

City: DENVER State: CO Zip: 80202

6. Contact Name: Sherry Glass Phone: (303)825-4822 Fax: (303)825-4825

Email: sglass@kpk.com

7. Well Name: Frank Well Number: #13-32-35R

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

9. Proposed Total Measured Depth: 8051

## WELL LOCATION INFORMATION

10. QtrQtr: SWSW Sec: 32 Twp: 4N Rng: 67W Meridian: 6

Latitude: 40.264230 Longitude: -104.920290

 Footage at Surface: 616 FNL/FSL 846 FEL/FWL  
 FSL FWL

11. Field Name: Wattenberg Field Number: 90750

12. Ground Elevation: 4942 13. County: WELD

## 14. GPS Data:

Date of Measurement: 01/25/2007 PDOP Reading: 6.0 Instrument Operator's Name: Kipper Goldsberry

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  
 160 FSL 1392 FWL 160 FSL 1392 FWL  
 Sec: 32 Twp: 4N Rng: 67W Sec: 32 Twp: 4N 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: 616 ft

18. Distance to nearest property line: 616 ft 19. Distance to nearest well permitted/completed in the same formation: 50 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	160	N2NW5-3N,S2SW32
Niobrara-Codell	NBCD	407-87	160	N2NW5-3N,S2SW32

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):  
SW/4 section 32-T4N-R67W

25. Distance to Nearest Mineral Lease Line: \_\_\_\_\_ 160 ft 26. Total Acres in Lease: \_\_\_\_\_ 160

### 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
SURF	12+1/4	8+5/8	24#	600	250	600	
1ST	7+7/8	4+1/2	11.5#	8,051	750	8,051	

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

33. Comments No conductor casing will be used. Offset to Anderson #13-32, API #05-123-23789.

34. Location ID: \_\_\_\_\_ 332701

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: Sherry Glass

Title: Engineering Technician Date: \_\_\_\_\_ Email: sglass@kpk.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: \_\_\_\_\_ Director of COGCC Date: \_\_\_\_\_

#### API NUMBER

05 123 26141 00

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
400060910	PLAT	FRANK 13-32-35R2.pdf
400060911	TOPO MAP	FRANK 13-32-35R-VIC.pdf
400060912	DEVIATED DRILLING PLAN	FRANK 13-32-35R2 DIRECTIONAL PLANpdf.pdf
400060913	LEASE MAP	Frank #13-32-35R Lease map.pdf
400072480	30 DAY NOTICE LETTER	30-day notice Frank 13-32-35R.pdf
400072488	PROPOSED SPACING UNIT	20- day offset notice Frank 13-32-35R.pdf
400072489	UNIT CONFIGURATION MAP	Frank #13-32-35R Unit Plat.pdf

Total Attach: 7 Files