

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:

400094509

Plugging Bond Surety

20080134

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: PINE RIDGE OIL & GAS LLC 4. COGCC Operator Number: 10276

5. Address: 600 17TH ST STE 800S
City: DENVER State: CO Zip: 80202

6. Contact Name: Moe Felman Phone: (303)226-6860 Fax: (303)226-1301
Email: moe.felman@cometridgeresources.com

7. Well Name: MACKINAW Well Number: 22-28

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

9. Proposed Total Measured Depth: 3500

WELL LOCATION INFORMATION

10. QtrQtr: SENW Sec: 28 Twp: 19S Rng: 69W Meridian: 6

Latitude: 38.367497 Longitude: -105.118059

Footage at Surface: 2412 FNL/FSL FNL 2196 FEL/FWL FWL

11. Field Name: Florence-Canon City Field Number: 24600

12. Ground Elevation: 5331 13. County: FREMONT

14. GPS Data:

Date of Measurement: 09/21/2010 PDOP Reading: 1.8 Instrument Operator's Name: Chris Pearson

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

Footage at Top of Prod Zone: FNL/FSL 2156 FNL 1282 FWL 2156 FNL 1282 FWL
Bottom Hole: FNL/FSL 2156 FNL 1282 FWL
Sec: 28 Twp: 19S Rng: 69W Sec: 28 Twp: 19S Rng: 69W

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: 462 ft

18. Distance to nearest property line: 225 ft 19. Distance to nearest well permitted/completed in the same formation: 690 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#: _____

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):
Refer to attached mineral lease description document

25. Distance to Nearest Mineral Lease Line: 200 ft 26. Total Acres in Lease: 2584

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	0
SURF	12+1/4	8+5/8	24	580	135	580	0
1ST	7+7/8	5+1/2	15.5				

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

33. Comments _____

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: Drilling Manager Date: _____ 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
400094517	PLAT	MACKINAW 22-28 19S69W28 Well Cert.pdf
400094518	LEASE MAP	Mackinaw 22-28 Lease Map.pdf
400094519	LEGAL/LEASE DESCRIPTION	Mackinaw 22-28 Lease Legal Desc.pdf
400094521	TOPO MAP	Mackinaw 22-28 Topographic Map.pdf
400094522	DEVIATED DRILLING PLAN	Mackinaw 22-28_DirPlan_Ver 1_092210.pdf

Total Attach: 5 Files