

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:
400096443
Plugging Bond Surety
20030110

3. Name of Operator: WHITING OIL AND GAS CORPORATION 4. COGCC Operator Number: 96155

5. Address: 1700 BROADWAY STE 2300
City: DENVER State: CO Zip: 80290

6. Contact Name: Larry Brown Phone: (307)237-9310 Fax: ()
Email: ld_brown@bresnan.net

7. Well Name: Pawnee Well Number: 16-13H

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

9. Proposed Total Measured Depth: 10266

WELL LOCATION INFORMATION

10. QtrQtr: NWSW Sec: 16 Twp: 10N Rng: 59W Meridian: 6

Latitude: 40.835220 Longitude: -103.992170

Footage at Surface: 1834 FNL/FSL FSL 413 FEL/FWL FWL

11. Field Name: _____ Field Number: _____

12. Ground Elevation: 5115 13. County: WELD

14. GPS Data:

Date of Measurement: 09/10/2010 PDOP Reading: 2.2 Instrument Operator's Name: Tim Leibert

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

Footage at Top of Prod Zone: FNL/FSL 1701 FSL 921 FWL 660 Bottom Hole: FNL/FSL 660 FEL/FWL FEL
Sec: 16 Twp: 10N Rng: 59W Sec: 16 Twp: 10N Rng: 59W

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: 5280 ft

18. Distance to nearest property line: 413 ft 19. Distance to nearest well permitted/completed in the same formation: 5280 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.) |
|------------------------|----------------|-------------------------|-------------------------------|--------------------------------------|
| D-Sand | DK-JD | | | |
| J-Sand | DK-J | | | |
| Niobrara | NBRR | | | |

21. Mineral Ownership: Fee State Federal Indian Lease #: 84405

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):
All of Section 16, T10N-R59W

25. Distance to Nearest Mineral Lease Line: 413 ft 26. Total Acres in Lease: 640

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 | 9+5/8 | 36 | 1,500 | 421 | 1,500 | 0 |
| 1ST | 8+3/4 | 7 | 29 | 6,604 | 574 | 6,604 | 0 |
| 2ND | 6 | 4+1/2 | 11.6 | 10,266 | | | |

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: Larry D. Brwn

Title: Agent Date: 9/30/2010 Email: ld_brown@bresnan.net

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 | Permit Number: _____ | Expiration Date: _____ |
| 05 | 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 |
|-------------|------------------------|---|
| 400096443 | FORM 2 SUBMITTED | 400096443.pdf |
| 400096499 | WELL LOCATION PLAT | PAWNEE 16-13H DWG.pdf |
| 400096509 | TOPO MAP | Pawnee 16-13H Access.pdf |
| 400096519 | DEVIATED DRILLING PLAN | Pawnee 16-13H Directional Plan for APD 09-21-10.pdf |
| 400097098 | DRILLING PLAN | PAWNEE 16-13H APD_DRILL PLAN.pdf |

Total Attach: 5 Files