

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



|    |    |    |    |
|----|----|----|----|
| DE | ET | OE | ES |
|----|----|----|----|

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:

400096310

Plugging Bond Surety

19770003

3. Name of Operator: ANTELOPE ENERGY COMPANY LLC

4. COGCC Operator Number: 3250

5. Address: P O BOX 577

City: KIMBALL State: NE Zip: 69145

6. Contact Name: Venessa Langmacher Phone: (303)857-9999 Fax: (303)450-9200  
Email: vlpermitco@aol.com

7. Well Name: State Well Number: 9-61-16

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

9. Proposed Total Measured Depth: 7400

WELL LOCATION INFORMATION

10. QtrQtr: SESE Sec: 16 Twp: 9N Rng: 61W Meridian: 6

Latitude: 40.743690 Longitude: -104.203810

Footage at Surface: 660 FNL/FSL 660 FEL/FWL  
FSL FEL

11. Field Name: Wildcat Field Number: 99999

12. Ground Elevation: 4966 13. County: WELD

14. GPS Data:

Date of Measurement: 09/01/2010 PDOP Reading: 2.8 Instrument Operator's Name: Darren Veal

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: 4571 ft

18. Distance to nearest property line: 660 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.) |
|------------------------|----------------|-------------------------|-------------------------------|--------------------------------------|
| Codell                 | CODL           |                         |                               |                                      |
| J Sand                 | JSND           |                         |                               |                                      |

21. Mineral Ownership: ☐ Fee ☒ State ☐ Federal ☐ Indian Lease #: 8437.5

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):  
T9N-R61W: S/2

25. Distance to Nearest Mineral Lease Line: 660 ft 26. Total Acres in Lease: 320

### 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 |
|-------------|--------------|----------------|-----------------|---------------|--------------|---------------|------------|
| SURF        | 13+3/8       | 9+5/8          | 36              | 1,000         | 650          | 1,000         | 0          |
| 1ST         | 8+3/4        | 7+0/0          | 23              | 7,400         | 275          | 7,400         | 6,000      |

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

33. Comments No conductor casing will be set. The distance to the nearest well completed in the same formation is greater than one mile from this location.

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: Venessa Langmacher

Title: Regulatory Supervisor Date: 10/1/2010 Email: vllpermitco@aol.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. Neslin Director of COGCC Date: 10/31/2010

API NUMBER

05 123 32490 00

Permit Number: \_\_\_\_\_ Expiration Date: 10/30/2012

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 hr notice of spud and if DA to Bo Brown at 970-397-4124 or e-mail at bo.brown@state.co.us .
- 2) If completed, provide cement coverage from TD to a minimum of 200' above Niobrara. Verify coverage with cement bond log.
- 3) If dry hole, set 60 sks cement from 50' below J Sand base to 100' above J Sand top, 40 sks cement 50' above Niobrara top, tag 50 sks cement ½ out, ½ in surface casing, 10 sks cement top of surface casing, cut 4' below GL, weld on plate, 5 sks cement in rat hole & 5 sks cement in mouse hole. Restore surface location.

### **Attachment Check List**

| Att Doc Num | Name                 | Doc Description      |
|-------------|----------------------|----------------------|
| 400096310   | FORM 2 SUBMITTED     | LF@2596605 400096310 |
| 400096937   | WELL LOCATION PLAT   | LF@2596606 400096937 |
| 400097173   | SURFACE AGRMT/SURETY | LF@2596607 400097173 |

Total Attach: 3 Files

### **General Comments**

| <b><u>User Group</u></b> | <b><u>Comment</u></b>   | <b><u>Comment Date</u></b> |
|--------------------------|---|----------------------------|
| Permit                   | E-mailed Tim Kelly at SLB for verification of Surface Restoration bond. | 10/12/2010<br>10:39:33 AM  |
| Permit                   | Back to draft for SUA   | 10/4/2010<br>11:57:31 AM   |

Total: 2 comment(s)

Error: Subreport could not be shown.