

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:			Document Number: 400115180 Plugging Bond Surety 20080136	
1. <input checked="" type="checkbox"/> Drill , <input type="checkbox"/> Deepen, <input type="checkbox"/> Re-enter, <input type="checkbox"/> Recomplete and Operate				
2. TYPE OF WELL OIL <input type="checkbox"/> GAS <input checked="" type="checkbox"/> COALBED <input type="checkbox"/> OTHER _____ SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/> COMMINGLE ZONE <input type="checkbox"/>			Refiling <input type="checkbox"/> Sidetrack <input type="checkbox"/>	
3. Name of Operator: <u>OMIMEX PETROLEUM INC</u>		4. COGCC Operator Number: <u>66190</u>		
5. Address: <u>2001 BEACH ST STE 810</u> City: <u>FORT WORTH</u> State: <u>TX</u> Zip: <u>76103</u>				
6. Contact Name: <u>Cliff Williams</u> Phone: <u>(817)804-0098</u> Fax: <u>(817)460-1381</u> Email: <u>cliff_williams@omimexgroup.com</u>				
7. Well Name: <u>Bledsoe</u>		Well Number: <u>12-6-5-44</u>		
8. Unit Name (if appl): _____		Unit Number: _____		
9. Proposed Total Measured Depth: <u>2650</u>				
WELL LOCATION INFORMATION				
10. QtrQtr: <u>Lot 6</u> Sec: <u>6</u> Twp: <u>5N</u> Rng: <u>44W</u> Meridian: <u>6</u> Latitude: <u>40.430400</u> Longitude: <u>-102.317290</u>				
Footage at Surface: <u>1981</u> feet FNL/FSL <u>FSL</u> <u>861</u> feet FEL/FWL <u>FWL</u>				
11. Field Name: <u>Ballyneal</u>		Field Number: <u>1970</u>		
12. Ground Elevation: <u>3753.5</u>		13. County: <u>YUMA</u>		
14. GPS Data: Date of Measurement: <u>11/08/2010</u> PDOP Reading: <u>1.7</u> Instrument Operator's Name: <u>E. Johnson</u>				
15. If well is <input type="checkbox"/> Directional <input type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
17. Distance to the nearest building, public road, above ground utility or railroad: <u>1981</u>				
18. Distance to nearest property line: <u>3333 ft</u> 19. Distance to nearest well permitted/completed in the same formation: <u>690 ft</u>				
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.)
Niobrara	NBRR		160	SW/4 Section 6

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

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 6; T5N R44W and other lands. Exception location request letter is attached to this application.
25. Distance to Nearest Mineral Lease Line: 3333 ft 26. Total Acres in Lease: 60000

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 28 or 29 are yes, is this location in a sensitive area (Rule 901.e)? Yes No
31. Mud disposal: Offsite Onsite **If 28, 29, or 30 are "Yes" a pit permit may be required.**
Method: Land Farming Land Spreading Disposal Facility Other: evaporation
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	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
SURF	9+1/2	7+1/2	17		450	200	450	0
1ST	6+1/4	4+1/2	10.5		2,650	100	2,650	1,950

32. BOP Equipment Type: Annular Preventer Double Ram Rotating Head None
33. Comments NO CONDUCTOR CASING WILL BE USED IN THIS WELL. Exception Location Request attached.

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: Cliff Williams
Title: Land Manager Date: 1/12/2011 Email: cliff_williams@omimexgroup.co

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: 3/11/2011

Permit Number: _____ Expiration Date: 3/10/2013

API NUMBER
05 125 11965 00

CONDITIONS OF APPROVAL, IF ANY:

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

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 to Colby Horton at 970-867-2517 or e-mail at colby.horton@state.co.us.
- 2) Set surface casing at least 50' into Pierre Shale for aquifer coverage, (450' minimum - as proposed). Setting surface casing less than the approved depth is a permit violation unless prior written approval is obtained from the COGCC.
- 3) If completed, provide cement coverage from TD to a minimum of 200' above Niobrara. Verify coverage with cement bond log.
- 4) If dry hole, set 35 sks cement 50' above Niobrara top, 35 sks cement 1/2 out, 1/2 in surface casing, 10 sks cement at top of surface casing, cut casing 4' below GL, weld on plate, 5 sks cement in rat hole & 5 sks cement in mouse hole.

Attachment Check List

Att Doc Num	Name
2566601	SURFACE CASING CHECK
2586490	SURFACE AGRMT/SURETY
2586516	EXCEPTION LOC REQUEST
400115180	FORM 2 SUBMITTED
400115197	TOPO MAP
400121624	SURFACE AGRMT/SURETY
400121625	30 DAY NOTICE LETTER
400122887	WELL LOCATION PLAT
400122888	EXCEPTION LOC WAIVERS

Total Attach: 9 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	PERMITTING PASSED- JLV	3/8/2011 3:17:43 PM
Permit	Attached Request for Exception Location. JLV	3/8/2011 3:16:26 PM
Permit	Called Operator to discuss SUA; hold to have the SUA uploaded without monetary values. JLV	2/11/2011 4:23:57 PM

Total: 3 comment(s)

BMP

<u>Type</u>	<u>Comment</u>

Total: 0 comment(s)