

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:

400140906

Plugging Bond Surety

20080107

3. Name of Operator: QUICKSILVER RESOURCES INC4. COGCC Operator Number: 102555. Address: 777 WEST ROSEDALECity: FT WORTH State: TX Zip: 761046. Contact Name: Venessa Langmacher Phone: (303)8579999 Fax: (303)4509200Email: vllpermitco@aol.com7. Well Name: Gamma StateWell Number: 21-228. Unit Name (if appl): Sombrero UnitUnit Number: COC-72192X9. Proposed Total Measured Depth: 9159

WELL LOCATION INFORMATION

10. QtrQtr: SW SW Sec: 15 Twp: 7N Rng: 93W Meridian: 6Latitude: 40.552353Longitude: -107.826786
 Footage at Surface: 606 feet FNL/FSL FSL 659 feet FEL/FWL FWL
11. Field Name: Lay CreekField Number: 4855012. Ground Elevation: 646913. County: MOFFAT

14. GPS Data:

Date of Measurement: 02/14/2011 PDOP Reading: 1.6 Instrument Operator's Name: Gary Streeter15. If well is ☒ Directional ☐ Horizontal (highly deviated) **submit deviated drilling plan.**
 Footage at Top of Prod Zone: FNL/FSL 643 FNL 2011 FWL 643 FNL 2011 FWL
 Bottom Hole: FNL/FSL 643 FNL 2011 FWL
 Sec: 22 Twp: 7N Rng: 93W Sec: 22 Twp: 7N Rng: 93W
16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 1478 ft18. Distance to nearest property line: 606 ft 19. Distance to nearest well permitted/completed in the same formation: 1900 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.)
Niobrara	NBRR			

21. Mineral Ownership: ☐ Fee ☒ State ☐ Federal ☐ Indian Lease #: 56/252-S

22. Surface Ownership: ☐ Fee ☐ State ☒ Federal ☐ Indian

23. Is the Surface Owner also the Mineral Owner? ☐ Yes ☒ No Surface Surety ID#: 20110043

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):
T7N -R93W: Section 15: Lot 4 (SW) Section 22: Lot 3 (NW) Section 2: Lot 1 (NE)

25. Distance to Nearest Mineral Lease Line: 633 ft 26. Total Acres in Lease: 454

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

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.

If 28, 29, or 30 are "Yes" a pit permit may be required.

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
CONDUCTOR	20	16		0	40		40	0
SURF	12+1/4	9+5/8	36	0	1,200	215	1,200	0
1ST	8+3/4	7	26	1000	6,980	600	6,980	1,000
2ND	6+1/8	4+1/2	11.6	6500	9,159	190	9,159	6,500

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

33. Comments _____

34. Location ID: 313399

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: _____ 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: _____ 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
400146263	
400146264	

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)

BMP

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

Total: 0 comment(s)