

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:

400140906

Plugging Bond Surety

20080107

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: QUICKSILVER RESOURCES INC 4. COGCC Operator Number: 10255

5. Address: 777 WEST ROSEDALE
City: FT WORTH State: TX Zip: 76104

6. Contact Name: Venessa Langmacher Phone: (303)8579999 Fax: (303)4509200
Email: vllpermitco@aol.com

7. Well Name: Gamma State Well Number: 21-22

8. Unit Name (if appl): Sombrero Unit Unit Number: COC-72192X

9. Proposed Total Measured Depth: 9159

WELL LOCATION INFORMATION

10. QtrQtr: SW SW Sec: 15 Twp: 7N Rng: 93W Meridian: 6

Latitude: 40.552353 Longitude: -107.826786

Footage at Surface: 606 feet FSL 659 feet FWL

11. Field Name: Lay Creek Field Number: 48550

12. Ground Elevation: 6469 13. County: MOFFAT

14. GPS Data:

Date of Measurement: 02/14/2011 PDOP Reading: 1.6 Instrument Operator's Name: Gary Streeter

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 _____
643 FNL 2011 FWL 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 No

17. Distance to the nearest building, public road, above ground utility or railroad: 1478 ft

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

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	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.

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Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
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)