


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		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">DE</td> <td style="width: 25%;">ET</td> <td style="width: 25%;">OE</td> <td style="width: 25%;">ES</td> </tr> </table>	DE	ET	OE	ES
DE	ET	OE	ES				
APPLICATION FOR PERMIT TO:			Document Number: 1636049 Plugging Bond Surety 19860025				
1. <input type="checkbox"/> Drill, <input type="checkbox"/> Deepen, <input type="checkbox"/> Re-enter, <input checked="" type="checkbox"/> Recomplete and Operate							
2. TYPE OF WELL OIL <input checked="" type="checkbox"/> GAS <input type="checkbox"/> COALBED <input type="checkbox"/> OTHER _____ SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input checked="" type="checkbox"/> COMMINGLE ZONE <input checked="" type="checkbox"/>			Refiling <input type="checkbox"/> Sidetrack <input type="checkbox"/>				
3. Name of Operator: <u>TOP OPERATING COMPANY</u>		4. COGCC Operator Number: <u>39560</u>					
5. Address: <u>10881 ASBURY AVE STE 230</u> City: <u>LAKEWOOD</u> State: <u>CO</u> Zip: <u>80227</u>							
6. Contact Name: <u>MURRAY J. HERRING</u> Phone: <u>(303)727-9915</u> Fax: <u>(303)727-9925</u> Email: <u>TOPOPRTNG@AOL.COM</u>							
7. Well Name: <u>RUNYAN</u>		Well Number: <u>1</u>					
8. Unit Name (if appl): _____		Unit Number: _____					
9. Proposed Total Measured Depth: <u>7800</u>							
WELL LOCATION INFORMATION							
10. QtrQtr: <u>SESE</u> Sec: <u>17</u> Twp: <u>3N</u> Rng: <u>68W</u> Meridian: <u>6</u> Latitude: <u>40.221000</u> Longitude: <u>-105.021640</u>							
Footage at Surface: <u>990</u> feet FNL/FSL <u>990</u> feet FEL/FWL <u>FEL</u>							
11. Field Name: <u>WATTENBERG</u>		Field Number: <u>90750</u>					
12. Ground Elevation: <u>5044</u>		13. County: <u>WELD</u>					
14. GPS Data: Date of Measurement: <u>07/05/2010</u> PDOP Reading: <u>2.8</u> Instrument Operator's Name: <u>R.K. HERRING</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>990</u> ft							
18. Distance to nearest property line: <u>990</u> ft 19. Distance to nearest well permitted/completed in the same formation: <u>1</u> mi							
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.)			
J SAND	JSND	232-23	320	E/2			
NIOBRARA-CODELL	NB-CD	407-87	160	SE/4			

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 Bond ☐ \$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):
E/2, SEC. 17 3N 68W S. OF HIGHLAND DITCH

25. Distance to Nearest Mineral Lease Line: _____ 990 ft _____ 26. Total Acres in Lease: _____ 219 _____

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.

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
SURF	12+1/4	8+5/8	24	0	205	180	205	0
1ST	7+7/8	4+1/2	11.6	0	7,790	250	7,790	7,004

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

33. Comments A FORM 2A IS NOT REQUIRED FOR THIS REASON: NO PIT WILL BE CONSTRUCTED, THERE WILL BE NO SURFACE DISTURBANCE BEYOND THE ORIGINAL DISTURBED WHEN THE WELL WAS DRILLED.

34. Location ID: _____ 319066 _____

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: MURRAY J. HERRING

Title: VICE PRESIDENT Date: 5/18/2011 Email: TOPOPRTING@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: 6/16/2011

API NUMBER

05 123 10614 00

Permit Number: _____ Expiration Date: 6/15/2013

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.

Prior to recomplete, operator must: 1) Verify existing cement with a cement bond log. 2) If it is not present as follows, provide remedial cement 200' above Niobrara (minimum cement top of 6700'). Verify remedial cement coverage with cement bond log.

Attachment Check List

Att Doc Num	Name
1636049	APD ORIGINAL
1636050	TOPO MAP
1636051	30 DAY NOTICE LETTER
1636052	WELLBORE DIAGRAM

Total Attach: 4 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Requesting form 4 for recomplete. Changed unit config to E/2 for JSAND & SE/4 for NB-CD.	6/7/2011 10:16:38 AM
Permit	Added plugging bond, removed surface bond (using lease), Added location ID, zone type multiple. Permission to make changes given by Opr-Murray who also explained the well bore diagram as; "ANITA BRUNS ALWAYS CALLS ME FOR A WELL BORE DIAGRAM HENCE I INCLUDED ONE. HAVE NOT RE COMPLETED WELL YET. WILL SUBMIT A ACTUATE DIAGRAM THEN OR A PROPOSED DIAGRAM NOW IF REQUIRED." sf	5/23/2011 10:36:08 AM
Permit	Waiting on Opr to provide bonding information, zone type, location id is incorrect. Statements re: 2A are incomplete. sf	5/20/2011 9:16:17 AM
Data Entry	CHECK #34. LOCATION ID INCORRECT. OPERATOR NOT DATE SIGNATURE.	5/19/2011 10:04:32 AM

Total: 4 comment(s)

BMP

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

Total: 0 comment(s)