

FORM
2Rev
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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APPLICATION FOR PERMIT TO:

1. ☒ Drill, ☐ Deepen, ☐ Re-enter, ☐ Recomplete and Operate

2. TYPE OF WELL

OIL ☒ GAS ☐ COALBED ☐ OTHER _____
 SINGLE ZONE ☒ MULTIPLE ☐ COMMINGLE ☐

Refiling ☐
 Sidetrack ☐

Document Number:

400184624

Plugging Bond Surety

20080134

3. Name of Operator: PINE RIDGE OIL & GAS LLC 4. COGCC Operator Number: 10276

5. Address: 600 17TH ST STE 800S

City: DENVER State: CO Zip: 80202

6. Contact Name: PAUL GOTTLOB Phone: (303)226-1316 Fax: (303)226-1301

Email: Paul.Gottlob@cometridgeresources.com

7. Well Name: Swordfish Well Number: 13-31

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

9. Proposed Total Measured Depth: 6004

WELL LOCATION INFORMATION

10. QtrQtr: Lot 2 Sec: 31 Twp: 19S Rng: 69W Meridian: 6

Latitude: 38.349677 Longitude: -105.159650

Footage at Surface: 1701 feet FNL/FSL 817 feet FEL/FWL 817 feet

11. Field Name: FLORENCE-CANON CITY Field Number: 24600

12. Ground Elevation: 5653 13. County: FREMONT

14. GPS Data:

Date of Measurement: 06/23/2011 PDOP Reading: 1.6 Instrument Operator's Name: Chris Pearson

15. If well is ☐ Directional ☒ Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL 1204 FSL 1428 FWL 15 FEL/FWL 2349 FEL 15
 Sec: 31 Twp: 19S Rng: 69W Sec: 31 Twp: 19S Rng: 69W

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: 230 ft

18. Distance to nearest property line: 377 19. Distance to nearest well permitted/completed in the same formation: 1933 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.)
Pierre	PRRE			

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#: 20080135

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):

See attached

25. Distance to Nearest Mineral Lease Line: 15 ft

26. Total Acres in Lease: 2518

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 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	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
CONDUCTOR	24	16	1/4Wt	0	60	5	60	0
SURF	12+1/4	9+5/8	32.3ppf	0	550	111	550	0
1ST	8+3/4	7	23.0ppf	0	4,110	35	4,110	3,785
1ST LINER	6+1/4	4+1/2	11.6ppf	0	6,004			

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

33. Comments Conductor cement volume is expressed in cubic yards. Production casing will not be cemented.

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: PAUL GOTTLÖB

Title: Sr. Engineering Tech. Date: 7/20/2011 Email: Paul.

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
400184624	FORM 2 SUBMITTED
400187399	DEVIATED DRILLING PLAN
400187422	TOPO MAP
400187423	WELL LOCATION PLAT
400187424	LEASE MAP
400187431	LEGAL/LEASE DESCRIPTION

Total Attach: 6 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)