

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:

400220485

PluggingBond SuretyID

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 ☐

3. Name of Operator: GENESIS GAS & OIL LLC

4. COGCC Operator Number: 10132

5. Address: 1701 WALNUT STREET - 4TH FL

City: KANSAS CITY State: MO Zip: 64108

6. Contact Name: Robert C. Behner Phone: (816)222-7500 Fax: (816)222-7501

Email: BBEHNER@GENESISGO.COM

7. Well Name: Fletcher Gulch Well Number: 4-42

8. Unit Name (if appl): Fletcher Gulch Unit Number: COC-68958X

9. Proposed Total Measured Depth: 1830

WELL LOCATION INFORMATION

10. QtrQtr: lot 18 Sec: 4 Twp: 1N Rng: 100W Meridian: 6

Latitude: 40.080906 Longitude: -108.623321

Footage at Surface: 1197 feet FNL/FSL 2330 feet FEL/FWL FSL

11. Field Name: Wildcat Field Number: 99999

12. Ground Elevation: 6089.9 13. County: RIO BLANCO

14. GPS Data:

Date of Measurement: 08/09/2008 PDOP Reading: 2.4 Instrument Operator's Name: Chris Hamilton

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 \_\_\_\_\_

Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_ Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_

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: 2567 ft

18. Distance to nearest property line: 2982 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 1297 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.)
Williams ForksCoal	WMFKC		10	

21. Mineral Ownership: ☐ Fee ☐ State ☒ Federal ☐ Indian Lease #: COC-063322

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):

sec 4 T1N R100W lots 5-20; sec 5 T1N R100W lots 5,6,11-14,19,20; sec 8 T1N R100W lots 1-16; sec 9 T1N R100W lots 1-16

25. Distance to Nearest Mineral Lease Line: 2780 ft 26. Total Acres in Lease: 2241

### 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: Bury Pit

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	500	200	500	0
1ST	7+7/8	5+1/2	15.5	0	1,830	210	1,830	0

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

33. Comments A conductor casing will not be used.

34. Location ID: 413918

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: Sheryl M. Little-Myers

Title: Agent 90-623-2833 Date: 1/1/2012 Email: Sheryl@MyersEnergyServices.

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

05 103 11551 00

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
400220485	FORM 2 SUBMITTED
400236826	PLAT

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>
General Housekeeping	Gold Book Standards, On Shore Order 1, and WRFO 2010 Surface Reclamation Protocol will be followed during all phases of the life of this location, as appropriate. Potential water and erosion will be considered, and those exposures will be defended. Noxious weed invasions will be avoided. Surface disturbances, other than as outlined in the subject APD package, will be avoided.

Total: 1 comment(s)