

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



Document Number:

400135278

Date Received:

03/08/2011

PluggingBond SuretyID

20080035

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: SINGLETREE RESOURCES INC

4. COGCC Operator Number: 10245

5. Address: 25528 GENESEE TRAIL RD

City: GOLDEN State: CO Zip: 80401

6. Contact Name: Tony Markve Phone: (303)462-3604 Fax: (303)462-3739

Email: tony@doubtbs.com

7. Well Name: Haley Smith Well Number: 41-24

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

9. Proposed Total Measured Depth: 5400

WELL LOCATION INFORMATION

10. QtrQtr: NENE Sec: 24 Twp: 11N Rng: 54W Meridian: 6

Latitude: 40.918900 Longitude: -103.345930

Footage at Surface: _____ feet FNL/FSL _____ feet FEL/FWL _____ feet
FNL _____ FEL _____

11. Field Name: Amber Field Number: 2400

12. Ground Elevation: 4341 13. County: LOGAN

14. GPS Data:

Date of Measurement: 02/10/2011 PDOP Reading: 2.8 Instrument Operator's Name: C. Vanmatre

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: 660 ft

18. Distance to nearest property line: 5280 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 1320 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.)
D Sand	DSND		40	NENE

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):

On separate sheet

25. Distance to Nearest Mineral Lease Line: 660 ft 26. Total Acres in Lease: 11120

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
SURF	11	8+5/8	24	0	720	195	720	
1ST	7+7/8	5+1/2	15.5	0	5,400	210	5,400	4,300

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

33. Comments Conductor casing will not be used. Please note distance to nearest property line is over 1 mile from this well location.

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: Tony Markve

Title: Engineer Date: 3/8/2011 Email: tony@doubtbs.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: 3/31/2011

API NUMBER
05 075 09390 00

Permit Number: _____ Expiration Date: 3/30/2013

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.

Note change in surface casing depth to 720' minimum

1. Provide 24 hr notice of spud to Colby Horton at 970-467-2517 or colby.horton@state.co.us.
2. Set surface casing per Rule 317d, cement to surface. Setting surface casing less than the approved depth is a permit violation unless prior written approval is obtained from the COGCC.
3. If completed, cement TD to 200' above D-Sand. Verify coverage with cement bond log.
4. If a dry hole, set 60 sks cement from 50' below D-Sand base to 100' above D-Sand top, 40 sks cement 50' above Niobrara top, 50 sks cement ½ out, ½ in surface casing, 10 sks cement at top of surface casing, cut casing 4' below GL, weld on plate, 5 sks cement in rat hole and 5 sks cement in mouse hole. Restore surface location.

Attachment Check List

Att Doc Num	Name
2111236	SURFACE CASING CHECK
400135278	FORM 2 SUBMITTED
400135285	PLAT
400135286	TOPO MAP
400135300	MINERAL LEASE MAP
400140396	30 DAY NOTICE LETTER
400140735	SURFACE AGRMT/SURETY

Total Attach: 7 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Back to draft for opr to redact figures in SUA. sf	3/9/2011 9:38:33 AM

Total: 1 comment(s)

BMP

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

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