

FORM
2

Rev
12/05

State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

400291145

Date Received:

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

PluggingBond SuretyID

3. Name of Operator: BOPCO LP 4. COGCC Operator Number: 10172

5. Address: 10375 PARK MEADOW DR #450
 City: LITTLETON State: CO Zip: 80124

6. Contact Name: Reed Haddock Phone: (303)305-7750 Fax: (303)799-5071
 Email: rhaddock@basspet.com

7. Well Name: Yellow Creek Federal Well Number: 29-13-1

8. Unit Name (if appl): Yellow Creek Unit Number: COC68957X

9. Proposed Total Measured Depth: 11589

WELL LOCATION INFORMATION

10. QtrQtr: NWSW Sec: 29 Twp: 1N Rng: 98W Meridian: 6
 Latitude: 40.024940 Longitude: -108.421790

Footage at Surface: 2113 feet FNL/FSL 856 feet FEL/FWL
FSL FWL

11. Field Name: Yellow Creek Field Number: 97955

12. Ground Elevation: 6791.2 13. County: RIO BLANCO

14. GPS Data:

Date of Measurement: 08/08/2006 PDOP Reading: 3.1 Instrument Operator's Name: Brock Slaugh

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: 4132 ft

18. Distance to nearest property line: 16632 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 2608 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.)
Castlegate	CSLGT			
Lower Segoe	SEGO			
Mesa verde	MVRD			
Rollins	RLNS			

21. Mineral Ownership: Fee State Federal Indian Lease #: COC59395

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):
See lease attached on previous submittal.

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

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	24	20	94	0	60	100	60	0
SURF	14+3/4	9+5/8	36	0	3,529	1,464	3,529	0
1ST	7+7/8	4+1/2	11.6	0	11,589	1,257	11,589	6,000

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

33. Comments No changes have been made from previously approved APD. This pad has not been built. A closed loop system will be used. No pits will be built. Cuttings will be hauled to an EPA approved landfill. Form 2 expires June 16, 2012. Form 2A expires June 16, 2013.

34. Location ID: 316670

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: Reed Haddock

Title: Regulatory Analyst Date: _____ Email: rhaddock@basspet.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
05 103 11204 01

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

Total Attach: 0 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)