

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:

400269952

Date Received:

01/30/2013

APPLICATION FOR PERMIT TO:

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

2. TYPE OF WELL

OIL GAS COALBED OTHER WATER DISPOSAL
SINGLE ZONE MULTIPLE COMMINGLE

Refiling
Sidetrack

PluggingBond SuretyID

20100031

3. Name of Operator: KOCH EXPLORATION COMPANY, LLC

4. COGCC Operator Number: 49100

5. Address: 950 17TH STREET #1900

City: DENVER State: CO Zip: 80202

6. Contact Name: Natalie Naeve Phone: (303)325-2565 Fax: (303)325-2599

Email: natalie.naeve@kochind.com

7. Well Name: AHU WYATT Well Number: 25-43 SWD

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

9. Proposed Total Measured Depth: 3700

WELL LOCATION INFORMATION

10. QtrQtr: SWSE Sec: 25 Twp: 2N Rng: 97W Meridian: 6

Latitude: 40.106933 Longitude: -108.224175

Footage at Surface: 441 feet FNL/FSL FSL 1959 feet FEL/FWL FEL

11. Field Name: WHITE RIVER Field Number: 92800

12. Ground Elevation: 5819 13. County: RIO BLANCO

14. GPS Data:

Date of Measurement: 04/30/2012 PDOP Reading: 1.2 Instrument Operator's Name: Robert L. Kay

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 _____
FSL _____ FEL _____ FSL _____ FEL _____
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: 918 ft

18. Distance to nearest property line: 441 19. Distance to nearest well permitted/completed in the same formation(BHL): 2 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.)
OHIO CREEK	OCRK			

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, SENW & E/2SE Sec. 25-T2N-R97W

25. Distance to Nearest Mineral Lease Line: 441 ft 26. Total Acres in Lease: 520

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	16+0/0	13+3/8	48	0	250	370	250	0
SURF	12+1/4	9+5/8	36	0	1,100	320	1,100	0
1ST	8+3/4	7+0/0	23	0	3,700	400	3,700	500

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

33. Comments _____

34. Location ID: 316367

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: Natalie L. Naeve

Title: Operations Engineer Date: 1/30/2013 Email: natalie.naeve@kochind.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

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.

Date retrieval failed for the subreport 'IntPolicy_MTO' located at: W:\natpub\Nat\Reports\policy_nto.rdl. Please check th

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400269952	FORM 2 SUBMITTED
400360580	DRILLING PLAN
400360582	SURFACE AGRMT/SURETY
400360585	WELLBORE DIAGRAM
400362517	WELL LOCATION PLAT
400362518	REFERENCE AREA MAP
400362537	MINERAL LEASE MAP
400362553	30 DAY NOTICE LETTER
400362554	FORM 2A

Total Attach: 9 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)