

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:

400371910

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

20120011

3. Name of Operator: NIGHTHAWK PRODUCTION LLC

4. COGCC Operator Number: 10399

5. Address: 1805 SHEA CENTER DR #290

City: HIGHLANDS State: CO Zip: 80129
RANCH

6. Contact Name: KYLA VAUGHAN Phone: (505)635-5669 Fax: ()

Email: KVAUGHAN@LTENV.COM

7. Well Name: JOHN CRAIG Well Number: 1-2

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

9. Proposed Total Measured Depth: 8800

WELL LOCATION INFORMATION

10. QtrQtr: NENE Sec: 2 Twp: 10S Rng: 56W Meridian: 6

Latitude: 39.211790 Longitude: -103.623950

Footage at Surface: 1222 feet FNL/FSL 665 feet FEL/FWL
FNL FEL

11. Field Name: OLD HOMESTEAD Field Number: 60634

12. Ground Elevation: 5267 13. County: LINCOLN

14. GPS Data:

Date of Measurement: 12/04/2012 PDOP Reading: 3.7 Instrument Operator's Name: KEITH WESTFALL

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: 6468 ft

18. Distance to nearest property line: 665 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 1533 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.) |
|------------------------|----------------|-------------------------|-------------------------------|--------------------------------------|
| ARBUCKLE | ABCK | | | |
| ATOKA | ATOK | | | |
| CHEROKEE | CHRK | | | |
| LANSING-KANSAS CITY | LGKC | | | |
| MARMATON | MRTN | | | |
| MORROW | MRRW | | | |
| SPERGEN | SPGN | | | |
| WARSAW | WRSW | | | |
| WOLFCAMP | WFCMP | | | |

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):

SEC 2, T10S, R56W: LOTS 1,2,3,4, S1/2N1/2, S1/2 (ALL) ; PLUS ADDITIONAL, SEE ATTACHED EXHIBIT A

25. Distance to Nearest Mineral Lease Line: 665 ft 26. Total Acres in Lease: 5157

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: BACKFILL WHEN DRY

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 | 300 | 197 | 300 | 0 |
| 1ST | 7+7/8 | 5+1/2 | 17 | 0 | 8,800 | 599 | 8,800 | 3,649 |

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

33. Comments NO SURFACE CASING WILL BE USED.

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: KYLA VAUGHAN

Title: AGENT FOR NIGHTHAWK Date: _____ Email: KVAUGHAN@LTENV.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.

Data retrieval failed for the subreport 'IntPolicy_NTO' located at: W:\Inetpub\NetReport\policy_nto.rdl. Please check th

Attachment Check List

| Att Doc Num | Name |
|-------------|--------------------|
| 400371945 | PROPOSED BMPs |
| 400378693 | WELL LOCATION PLAT |
| 400378694 | TOPO MAP |

Total Attach: 3 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> |
|--------------|----------------|
| Construction | SEE ATTACHED |

Total: 1 comment(s)