

FORM
2

Rev
12/05

State of Colorado Oil and Gas Conservation Commission

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Document Number:

400449084

Date Received:

07/17/2013

PluggingBond SuretyID

20110179

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: GUNNISON ENERGY CORPORATION 4. COGCC Operator Number: 100122

5. Address: 1801 BROADWAY #1200
City: DENVER State: CO Zip: 80202

6. Contact Name: Brett Murray Phone: (303)296-4222 Fax: (303)296-4555
Email: brett.murray@oxbow.com

7. Well Name: Jacobs Federal 1290 Well Number: #6-32 H2

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

9. Proposed Total Measured Depth: 16260

WELL LOCATION INFORMATION

10. QtrQtr: SW NE Sec: 6 Twp: 12S Rng: 90W Meridian: 6
Latitude: 39.045103 Longitude: -107.486125

Footage at Surface: 1521 feet FNL/FSL FNL 1685 feet FEL/FWL FEL

11. Field Name: Wildcat Field Number: 99999

12. Ground Elevation: 8052 13. County: GUNNISON

14. GPS Data:

Date of Measurement: 06/14/2013 PDOP Reading: 1.9 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 725 FNL 1788 FEL 1515 FSL 1784 FEL
Bottom Hole: FNL/FSL 1515 FSL 1784 FEL
Sec: 6 Twp: 12S Rng: 90W Sec: 30 Twp: 11S Rng: 90W

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: 1096 ft

18. Distance to nearest property line: 1052 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 5280 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.)
MANCOS	MNCS			

21. Mineral Ownership: Fee State Federal Indian Lease #: 069066, 070004

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 Separate

25. Distance to Nearest Mineral Lease Line: 0 ft 26. Total Acres in Lease: 160

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: Also Land Farming or use at

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	26+0/0	20+0/0	78.6	0	102			
SURF	16+0/0	13+3/8	54.5	0	850	320	600	
1ST	12+1/4	9+5/8	40	0	4500	400	4500	2000
2ND	8+3/4	7+0/0	26	0	8800	540	8800	4000
1ST LINER	6+1/8	4+1/2	12.6	7700	16260	540	16260	8200

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

33. Comments _____

34. Location ID: 324487

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: Brett Murray

Title: Land Manager Date: 7/17/2013 Email: brett.murray@oxbow.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.

COA Type Description

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Date retrieval failed for the subreport 'IntBelief_NTC' located at: \\Westpub\Net\Reports\belief_ntr.rdl. Please check th

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400449084	FORM 2 SUBMITTED
400449638	TOPO MAP
400449673	WELL LOCATION PLAT
400454060	LEASE MAP
400455301	DRILLING PLAN
400458933	OIL & GAS LEASE
400461123	DIRECTIONAL DATA
400463226	MULTI-WELL PLAN

Total Attach: 8 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Returned to draft: 1) Use section, not qtr/qtr in Top PZ & BHL S-T-R. 2) Required attachments for horizontal are deviated drilling plan and XCEL dir. template. 3) No lease description or lease map attachment. 4) Indicate salt/oil based muds? 4) Distance to mineral lease is 0'. 5) Total lease acres not filled in. 6) SHL latitude incorrect according to plat. 7) Loc ID# must be filled in. 8) Requires related 2A to be submitted. 9) Field name must be completed; use wildcat 10) Form 4 must be submitted to report as built for existing SI well.	7/18/2013 9:08:18 AM

Total: 1 comment(s)

Best Management Practices

<u>No</u>	<u>BMP/COA Type</u>	<u>Description</u>