

FORM  
2

Rev  
05/22

## State of Colorado

### Energy & Carbon Management Commission

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



Document Number:

403678533

(SUBMITTED)

Date Received:

02/19/2024

#### APPLICATION FOR PERMIT TO

☒ Drill ☐ Deepen ☐ Re-enter ☐ Recomplete and Operate

Amend ☐

TYPE OF WELL OIL ☐ GAS ☒ COALBED ☐ OTHER: \_\_\_\_\_

Refill ☐

ZONE TYPE SINGLE ZONE ☒ MULTIPLE ZONES ☐ COMMINGLE ZONES ☐

Sidetrack ☐

Well Name: IPU 1291

Well Number: 13-24 H3

Name of Operator: GUNNISON ENERGY LLC

COGCC Operator Number: 10515

Address: 1801 BROADWAY #1150

City: DENVER

State: CO

Zip: 80202

Contact Name: Tyson Johnston

Phone: (303)296-8807

Fax: ( )

Email: tyson.johnston@oxbow.com

#### FINANCIAL ASSURANCE FOR PLUGGING, ABANDONMENT, AND RECLAMATION

##### COGCC Financial Assurance

☐ The Operator has provided or will provide Financial Assurance to the COGCC for this Well.

Surety ID Number (if applicable): \_\_\_\_\_

##### Federal Financial Assurance

☒ In checking this box, the Operator certifies that it has provided or will provide at least this amount of Financial Assurance to the federal government for this Well. (Per Rule702.a.)

Amount of Federal Financial Assurance \$ 1136

#### WELL LOCATION INFORMATION

##### Surface Location

QtrQtr: NENW Sec: 24 Twp: 12S Rng: 91W Meridian: 6

FNL/FSL

FEL/FWL

Footage at Surface: 149 Feet FNL 2134 Feet FWL

Latitude: 39.006505

Longitude: -107.505092

GPS Data:

GPS Quality Value: 2.2

Type of GPS Quality Value: PDOP

Date of Measurement: 01/02/2024

Ground Elevation: 7809

Field Name: WILDCAT

Field Number: 99999

Well Plan: is ☐ Directional ☒ Horizontal (highly deviated) ☐ Vertical

If Well plan is Directional or Horizontal attach Deviated Drilling Plan and Directional Data.

##### Subsurface Locations

Top of Productive Zone (TPZ)

Sec: 13 Twp: 12S Rng: 91W

Footage at TPZ: 963

FSL

1443

FEL

Measured Depth of TPZ: 9007

True Vertical Depth of TPZ: 7430

FNL/FSL

FEL/FWL

**Base of Productive Zone (BPZ)**Sec: 12 Twp: 12S Rng: 91WFootage at BPZ: 2376 FSL 769 FWLMeasured Depth of BPZ: 16368True Vertical Depth of BPZ: 7902 FNL/FSL FEL/FWL**Bottom Hole Location (BHL)**Sec: 12 Twp: 12S Rng: 91WFootage at BHL: 2376 FSL 769 FWL

FNL/FSL

FEL/FWL

**LOCAL GOVERNMENT PERMITTING INFORMATION**County: DELTAMunicipality: N/A

Is the Surface Location of this Well in an area designated as one of State interest and subject to the requirements of §

24-65.1-108 C.R.S.? No

Per § 34-60-106(1)(f)(I)(A) C.R.S., the following questions pertain to the Relevant Local Government approval of the siting of the proposed Oil and Gas Location.

SB 19-181 provides that when "applying for a permit to drill," operators must include proof that they sought a local government siting permit and the disposition of that permit application, or that the local government does not have siting regulations. § 34-60-106(1)(f)(I)(A) C.R.S.

Does the Relevant Local Government regulate the siting of Oil and Gas Locations, with respect to this Location? ☐ Yes ☒ No☐ If yes, in checking this box, I hereby certify that an application has been filed with the local government with jurisdiction to approve the siting of the proposed oil and gas location.

The disposition of the application filed with the Relevant Local Government is: \_\_\_\_\_ Date of Final Disposition: \_\_\_\_\_

Comments: \_\_\_\_\_

**SURFACE AND MINERAL OWNERSHIP AT WELL'S OIL & GAS LOCATION**Surface Owner of the land at this Well's Oil and Gas Location: ☒ Fee ☐ State ☐ Federal ☐ IndianMineral Owner beneath this Well's Oil and Gas Location: ☒ Fee ☐ State ☐ Federal ☐ Indian

Surface Owner Protection Bond (if applicable): \_\_\_\_\_

Surety ID Number (if applicable): \_\_\_\_\_

**MINERALS DEVELOPED BY WELL**

The ownership of all the minerals that will be developed by this Well is (check all that apply):

☒ Fee☐ State☒ Federal☐ Indian☐ N/A

## LEASE INFORMATION

Using standard QtrQtr, Section, Township, Range format describe one entire mineral lease as follows:

\* If this Well is within a unit, describe a lease that will be developed by the Well.

\* If this Well is not subject to a unit, describe the lease that will be produced by the Well.

(Attach a Lease Map or Lease Description or Lease if necessary.)

Township 12 South, Range 91 West, 6th P.M.  
Section 13: Lot 6, S/2SW/4, SW/4SE/4;  
Section 24: Lots 1, 2, NE/4NW/4, NW/4NE/4, AND H.E.S. No. 132  
Section 25: Lot 2, E/2NW/4, NE/4, N/2S/2  
H.E.S. No. 161 lying in Sections 23 and 24  
H.E.S. No. 133 lying in Sections 23, 24, 25, and 26  
H.E.S. No. 134 lying in Sections 25, 26, 35, and 36

Total Acres in Described Lease: 1354

Described Mineral Lease is: ☒ Fee ☐ State ☐ Federal ☐ Indian

Federal or State Lease #

## SAFETY SETBACK INFORMATION

Distance from Well to nearest:

Building: 236 Feet  
Building Unit: 5280 Feet  
Public Road: 5280 Feet  
Above Ground Utility: 5280 Feet  
Railroad: 5280 Feet  
Property Line: 2004 Feet

### INSTRUCTIONS:

- Specify all distances per Rule 308.b.(1).
- Enter 5280 for distance greater than 1 mile.
- Building - nearest building of any type. If nearest Building is a Building Unit, enter same distance for both.
- Building Unit – as defined in 100 Series Rules.

## OBJECTIVE FORMATIONS

Objective Formation(s)	Formation Code	Spacing Order Number(s)	Unit Acreage Assigned to Well	Unit Configuration (N/2, SE/4, etc.)
NIOBRARA-MANCOS	NBMN	586-1	5292	12S-91W Sec 24: NE $\frac{1}{4}$ NW $\frac{1}{4}$ ; Sec 13: SE $\frac{1}{4}$ SW $\frac{1}{4}$ , 12S-90W Sec 18: All; Sec 19: All; Sec 30: All, 12S-91W Sec 11: All; Sec 12: All; Sec 13: All; Sec 14: All; Sec 24: All; Sec 25: All

Federal or State Unit Name (if appl): Iron Point Unit

Unit Number: COC074545X

## SUBSURFACE MINERAL SETBACKS

Enter 5280 for distance greater than 1 mile.

Is this Well within a unit? Yes

If YES:

Enter the minimum distance from the Completed Zone of this Well to the Unit Boundary: 3485 Feet

Enter the minimum distance from the Completed Zone of this Well to the Completed Zone of an offset Well within the same unit permitted or completed in the same formation: 1180 Feet

If NO:

Enter the minimum distance from the Completed Zone of this Well to the Lease Line of the described lease: Feet

Enter the minimum distance from the Completed Zone of this Well to the Completed Zone of an offset Well producing from the same lease and permitted or completed in the same formation: Feet

## Exception Location

☐ If this Well requires the approval of a Rule 401.c Exception Location, enter the Rule or spacing order number and attach the Exception Location Request and Waivers.

## SPACING & FORMATIONS COMMENTS

## DRILLING PROGRAM

Proposed Total Measured Depth: 16368 Feet

TVD at Proposed Total Measured Depth 7902 Feet

Distance from the proposed wellbore to nearest existing or proposed wellbore belonging to another operator, including plugged wells:

Enter distance if less than or equal to 1,500 feet: Feet ☒ No well belonging to another operator within 1,500 feet

Will a closed-loop drilling system be used? Yes

Is H<sub>2</sub>S gas reasonably expected to be encountered during drilling operations at concentrations greater than or equal to 100 ppm? No If yes, attach an H<sub>2</sub>S Drilling Plan unless a plan was already submitted with the Form 2A per Rule 304.c.(10).

Will there be hydraulic fracture treatment at a depth less than 2,000 feet in this well? No

Will salt sections be encountered during drilling? No

Will salt based (>15,000 ppm Cl) drilling fluids be used? No

Will oil based drilling fluids be used? Yes

BOP Equipment Type: ☒ Annular Preventor ☒ Double Ram ☐ Rotating Head ☐ None

Beneficial reuse or land application plan submitted? No

Reuse Facility ID: or Document Number:

**CASING PROGRAM**

Casing Type	Size of Hole	Size of Casing	Grade	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
CONDUCTOR	30	20	Line	36	0	120	200	120	0
SURF	17+1/2	13+3/8	J55	68	0	2760	2470	2760	0
1ST	12+1/4	9+5/8	P110	40	0	5822	835	5822	0
2ND	8+3/4	5+1/2	P110	23	0	16358	2934	16358	0

☐ Conductor Casing is NOT planned

**POTENTIAL FLOW AND CONFINING FORMATIONS**

Zone Type	Formation /Hazard	Top M.D.	Top T.V.D.	Bottom M.D.	Bottom T.V.D.	TDS (mg/L)	Data Source	Comment
Groundwater	Wasatch	50	50	763	763	501-1000	Other	Grand Mesa, Uncompahgre, and Gunnison National Forests Supplemental Forest Plan Assessment: Groundwater
Hydrocarbon	Williamsfork	826	826	3127	3127			
Hydrocarbon	Cameo Coals	3127	3127	3242	3242			
Confining Layer	Rollins	3242	3242	3400	3400			
Hydrocarbon	Cozzette	3863	3863	3996	3966			
Hydrocarbon	Corcoran	3996	3996	4059	4059			
Hydrocarbon	Mancos	4059	4059	7517	6894			
Hydrocarbon	Niobrara-Mancos	7517	6894	16368	7902			

**OPERATOR COMMENTS AND SUBMITTAL**

Comments

This application is in a Comprehensive Area Plan No

CAP #: \_\_\_\_\_

Oil and Gas Development Plan Name IPU Lower 1291 #13-24OGDP ID#: 484162Location ID: 434522

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: \_\_\_\_\_

Print Name: Jessica DonahueTitle: Compliance SpecialistDate: 2/19/2024Email: jdonahue@ardorenvironmental.

Based on the information provided herein, this Application for Permit-to-Drill complies with COGCC Rules, applicable orders, and SB 19-181 and is hereby approved.

COGCC Approved: \_\_\_\_\_

Director of COGCC Date: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

API NUMBER

05



## Conditions Of Approval

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

0 COA	

## Best Management Practices

### No BMP/COA Type

### Description

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## Attachment List

### Att Doc Num

### Name

403678712	OffsetWellEvaluations Data
403678714	WELL LOCATION PLAT
403678715	DEVIATED DRILLING PLAN
403678728	DIRECTIONAL DATA

Total Attach: 4 Files

## General Comments

### User Group

### Comment

### Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)