

FORM
2

Rev
12/05

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

APPLICATION FOR PERMIT TO:

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

2. TYPE OF WELL

OIL GAS COALBED OTHER _____
SINGLE ZONE MULTIPLE ZONE COMMINGLE ZONE

Refiling

Sidetrack

Document Number:

1904392

Plugging Bond Surety

19970026

3. Name of Operator: MERIT ENERGY COMPANY

4. COGCC Operator Number: 56565

5. Address: 1221 40TH ST

City: EVANS State: CO Zip: 80620-2511

6. Contact Name: MICHALWHITE Phone: (972)628-1658 Fax: (972)628-1958

Email: MICHAL.WHITE@MERITENERGY.COM

7. Well Name: AVEY Well Number: 11-9

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

9. Proposed Total Measured Depth: 7650

WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 9 Twp: 1N Rng: 66W Meridian: 6

Latitude: 40.070530 Longitude: -104.789780

Footage at Surface: 879 FNL/FSL FNL 530 FEL/FWL FWL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 4981 13. County: WELD

14. GPS Data:

Date of Measurement: 09/17/2007 PDOP Reading: 3.3 Instrument Operator's Name: ROBERT THOMAS

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: 400

18. Distance to nearest property line: 86 19. Distance to nearest well permitted/completed in the same formation: 1111

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.)
J SAND	JSND	232.23	320	W/2
NIOBRARA/CODELL	NB-CD	407.87	160	NW4

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 Bon \$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):
 NW/4, SEC 4, T1N-R66W

25. Distance to Nearest Mineral Lease Line: 530 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 27 or 28 are yes, is this location in a sensitive area (Rule 903)? Yes No **If 28, 29, or 30 are "Yes" a pit permit may be required.**

31. Mud disposal: Offsite Onsite
 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	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bottom	Cement Top
SURF	12+1/4	8+5/8	24	980	300	980	0
1ST	7+7/8	4+1/2	11.6	7,650	600	7,650	0

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

33. Comments NO CONDUCTOR CASING WILL BE USED.

34. Location ID: 310040

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: MICHAL WHITE

Title: REG ANALYST Date: 4/30/2009 Email: MICHAL.WHITE@MERITENER

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: David S. Noshin Director of COGCC Date: 9/27/2009

API NUMBER
 05 123 25797 00

Permit Number: 20092563 Expiration Date: 9/26/2010

CONDITIONS OF APPROVAL, IF ANY: _____

Condition of Approval

Comment

Agency

1) PROVIDE 24 HOUR NOTICE OF MIRU TO JIM PRECUP AT 303-469-1902 OR E-MAIL AT JAMES.PRECUP@STATE.CO.US 2) COMPLY WITH RULE 317.I AND PROVIDE CEMENT COVERAGE FROM TD TO A MINIMUM OF 200' ABOVE NIOBRARA. VERIFY COVERAGE WITH CEMENT BOND LOG. PROVIDE CEMENT COVERAGE 200' ABOVE TO 200' BELOW SUSSEX - VERIFY ALL PLACED CEMENT WITH A CEMENT BOND LOG.

Location is in a sensitive area the drilling pit must be lined in accordance with Rule 904.

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EXCEPTION LOCATION 603.a(2) WITH WAIVERS

Attachment Check List

Att Doc Num	Name	Doc Description
1408849	TOPO MAP	LF@2052490 1408849
1759079	EXCEPTION LOC WAIVERS	LF@2139939 1759079
1904392	APD ORIG & 1 COPY	LF@2052470 1904392
1904393	WELL LOCATION PLAT	LF@2052473 1904393
1904395	SURFACE AGRMT/SURETY	LF@2052474 1904395
1904396	30 DAY NOTICE LETTER	LF@2052471 1904396
1904397	EXCEPTION LOC REQUEST	LF@2052472 1904397

Total Attach: 7 Files