

FORM

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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



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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:

1790836

Plugging Bond Surety

3. Name of Operator: BOPCO LP4. COGCC Operator Number: 101725. Address: 201 MAIN ST STE 2700City: FT WORTH State: TX Zip: 791026. Contact Name: BRUCE PATTERSON Phone: (303)799-5080 Fax: (303)799-5081Email: BPATTERSON@NEWTECHENG.COM7. Well Name: YELLOW CREEK FEDERAL XOM Well Number: 2-22-02168. Unit Name (if appl): YELLOW CREEK Unit Number: COC68957X9. Proposed Total Measured Depth: 12687

WELL LOCATION INFORMATION

10. QtrQtr: lot 6 Sec: 2 Twp: 1s Rng: 98w Meridian: 6Latitude: 40.001160 Longitude: -108.360710Footage at Surface: 1623 FNL/FSL FNL 2034 FEL/FWL FWL11. Field Name: YELLOW CREEK Field Number: 9795512. Ground Elevation: 6307 13. County: RIO BLANCO

14. GPS Data:

Date of Measurement: 01/02/2008 PDOP Reading: 1.8 Instrument Operator's Name: MITCH BATTY15. If well is ☒ Directional ☐ Horizontal (highly deviated) **submit deviated drilling plan.**Footage at Top of Prod Zone: FNL/FSL 3012 FNL 610 FWL 3012 FNL 610 FWL
Bottom Hole: FNL/FSL 3012 FNL 610 FWL 3012 FNL 610 FWL
Sec: 2 Twp: 1S Rng: 98W Sec: 2 Twp: 1S Rng: 98W16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 200018. Distance to nearest property line: 1623 19. Distance to nearest well permitted/completed in the same formation: 1201

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.)
CASTLEGATE	CSLGT			
LOWER SEGO	SEGO			
MESAVERDE	MVRD			
ROLLINS	RLNS			

21. Mineral Ownership: ☐ Fee ☐ State ☒ Federal ☐ Indian Lease #: COC62048

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):
SEC 2, T1S, R98W, 6TH PM LOTS 5-7, S1/2 OF NW1/4

25. Distance to Nearest Mineral Lease Line: 610 26. Total Acres in Lease: 376

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: CUTPITSONSITECLOSELO

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
CONDUCTOR	24	20+9/6	94	60	100	60	0
SURF	14+3/4	9+5/8	36	3,469	1,434	3,469	0
1ST	7+7/8	4+1/2	11.6	12,687	1,437	12,687	6,000

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

33. Comments NO CHANGES TO ORIGINAL DRILLING PLAN, REQUESTING EXTENSION FOR CURRENT PERMIT TO DRILL.

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: BRUCE PATTERSON

Title: PERMITTING Date: _____ Email: BPATTERSON@NEWTECHE

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

05 103 11343 00

Permit Number: _____ Expiration Date: _____

CONDITIONS OF APPROVAL, IF ANY:

Attachment Check List

Att Doc Num	Name	Doc Description
1790836	APD ORIG & 1 COPY	LF@2157763 1790836

Total Attach: 1 Files