

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



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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:

1774579

Plugging Bond Surety

3. Name of Operator: ROSETTA RESOURCES OPERATING LP

4. COGCC Operator Number: 10159

5. Address: 717 TEXAS STE 2800

City: HOUSTON State: TX Zip: _____

6. Contact Name: SHAWN HILDRETH Phone: (713)335-4104 Fax: (281)763-2320

Email: SHAWN.ROSETTARESOURCE.COM

7. Well Name: BOWMAN Well Number: 18-12

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

9. Proposed Total Measured Depth: 2499

WELL LOCATION INFORMATION

10. QtrQtr: NWSW Sec: 18 Twp: 2S Rng: 44W Meridian: 6

Latitude: 39.882520 Longitude: -102.350800

 Footage at Surface: 2518 FNL/FSL 960 FEL/FWL
 FSL FWL

11. Field Name: WILDCAT Field Number: 99999

12. Ground Elevation: 3880 13. County: YUMA

14. GPS Data:

Date of Measurement: 09/21/2008 PDOP Reading: 2.1 Instrument Operator's Name: MICHAEL FEIGENBAUM

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: 2488 ft

18. Distance to nearest property line: 381 ft 19. Distance to nearest well permitted/completed in the same formation: 1900 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.)
NIOBRARA	NBRR			

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):
W/2W/2, SEC. 18, T2S, R44W, 6TH PM

25. Distance to Nearest Mineral Lease Line: 381 ft 26. Total Acres in Lease: 170

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	9+7/8	7	17	400	180	400	0
1ST	6+1/8	4+1/2	10.5	2,499	90	2,499	2,099

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

33. Comments NO CONDUCTOR CASING WILL BE USED,

34. Location ID: 311233

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: SHAWN HILDRETH

Title: REGULATORY Date: _____ Email: SHAWN.ROSETTAREsour

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

05 125 11627 00

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.

Attachment Check List

Att Doc Num	Name	Doc Description
1774579	APD ORIGINAL	LF@2185054 1774579
1774580	WELL LOCATION PLAT	LF@2185056 1774580
1774581	TOPO MAP	LF@2185058 1774581
1774582	MINERAL LEASE MAP	LF@2185061 1774582
1774583	30 DAY NOTICE LETTER	LF@2185062 1774583

Total Attach: 5 Files