

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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Document Number:
1760008

Plugging Bond Surety
20010023

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

3. Name of Operator: K P KAUFFMAN COMPANY INC 4. COGCC Operator Number: 46290
 5. Address: 1675 BROADWAY, STE 2800
 City: DENVER State: CO Zip: 80202
 6. Contact Name: SHERRY GLASS Phone: (303)825-4822 Fax: (303)825-48255
 Email: SGLASS@KPK.COM
 7. Well Name: FIVE RIVERS Well Number: #4-16-31
 8. Unit Name (if appl): _____ Unit Number: _____
 9. Proposed Total Measured Depth: 7971

WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 16 Twp: 4N Rng: 66W Meridian: 6
 Latitude: 40.317010 Longitude: -104.789740
 Footage at Surface: 694 FNL 620 FEL 620 FWL
 11. Field Name: WATTENBERG Field Number: 90750
 12. Ground Elevation: 4734 13. County: WELD

14. GPS Data:

Date of Measurement: 11/27/2006 PDOP Reading: 1.8 Instrument Operator's Name: JEFF RHOTEN

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
1320 FNL 160 FWL 1320 FNL 160 FWL
 Sec: 16 Twp: 4N Rng: 66W Sec: 16 Twp: 4N Rng: 66W

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: 620 ft

18. Distance to nearest property line: 620 ft 19. Distance to nearest well permitted/completed in the same formation: 826 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.)
J SAND	JSND		320	N/2
NIOBRARA-CODELL	NB-CD	407-87	160	E/2NE/4

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):
N/2NW/4 SECTION 16-T4N-R66W

25. Distance to Nearest Mineral Lease Line: _____ 4 ft _____ 26. Total Acres in Lease: _____ 80 _____

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	620	500	620	
1ST	7+7/8	4+1/2	11.5	7,971	550	7,971	

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

33. Comments NO CONDUCTOR CASING WILL BE USED, CONSULTATION WITH SURFACE OWNER LATER AFTER LANDMAN BACK IN OFFICE AFTER HOLIDAY. SURFACE USE AGREEMENT ATTACHED. FORMERLY FIVE RIVERS #16-11-A2. PFFSETS MONFORT #1-29.

34. Location ID: _____ 332568 _____

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: SHERRY GLASS _____

Title: ENGINEERING TECHNICIAN _____ Date: _____ Email: SGLASS@KPK.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	Permit Number: _____	Expiration Date: _____
05	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
1760008	APD ORIGINAL	LF@2189762 1760008
1760020	WELL LOCATION PLAT	LF@2189763 1760020
1760022	LEASE MAP	LF@2189789 1760022
1760023	SURFACE AGRMT/SURETY	LF@2189766 1760023
1760024	30 DAY NOTICE LETTER	LF@2189765 1760024
1760025	DEVIATED DRILLING PLAN	LF@2189767 1760025
1760026	PROPOSED SPACING UNIT	LF@2189768 1760026
1760027	PROPOSED SPACING UNIT	LF@2189788 1760027
2063484	TOPO MAP	LF@2189764 2063484
2063485	SURFACE AGRMT/SURETY	LF@2189796 2063485

Total Attach: 10 Files