

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:

400011794

Plugging Bond Surety

2008

3. Name of Operator: OMIMEX PETROLEUM INC 4. COGCC Operator Number: 661905. Address: 2001 BEACH ST STE 810City: FORT WORTH State: TX Zip: 761036. Contact Name: Cliff Williams Phone: (817)321-7015 Fax: (817)735-8033Email: cliff.Williams@omimexgroup.com7. Well Name: Bledsoe Well Number: 2-7-5-44

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

9. Proposed Total Measured Depth: 2630

WELL LOCATION INFORMATION

10. QtrQtr: NWNE Sec: 7 Twp: 5n Rng: 44W Meridian: 6Latitude: 40.424050 Longitude: -102.309570Footage at Surface: 335 FNL/FSL FNL 2376 FEL/FWL FEL11. Field Name: Ballyneal Field Number: 197012. Ground Elevation: 3757.3 13. County: YUMA

14. GPS Data:

Date of Measurement: 10/31/2009 PDOP Reading: 2.4 Instrument Operator's Name: Ryan E. Dickinson15. 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 No17. Distance to the nearest building, public road, above ground utility or railroad: 335 ft18. Distance to nearest property line: 7646 ft 19. Distance to nearest well permitted/completed in the same formation: 864 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		160	

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):
Section 7, 5N, 44W, 6th P.M. and other lands.

25. Distance to Nearest Mineral Lease Line: 7646 ft 26. Total Acres in Lease: 60418

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: Evaporation

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	6+1/4	4+1/2	10.5	2,630	53	2,630	1,959
SURF	9+7/8	7	17	450	200	450	

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

33. Comments A well was permitted by Forest Oil with API 05-125-11345. That well was never drilled but the plats attached show that well as if it were drilled.

34. Location ID: 310952

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: Cliff Williams

Title: Land Manager Date: 11/19/2009 Email: cliff_williams@omimexgroup.co

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 11345 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
400016795	LOCATION DRAWING	Location Drawing.pdf
400016796	LOCATION PHOTO	Bledsoe 2-7-5-44 PICS.pdf
400019492	WELL LOCATION PLAT	Bledsoe 2-7-5-44.pdf

Total Attach: 3 Files