

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:

2585314

Plugging Bond Surety

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: SCHNEIDER ENERGY SERVICES INC 4. COGCC Operator Number: 768405. Address: P O BOX 297City: FORT MORGAN State: CO Zip: 807016. Contact Name: JEFF SCHNEIDER Phone: (970)867-9437 Fax: (970)867-9137Email: JEFFS@SCHNEIDERENERGY.COM7. Well Name: RUBY Well Number: 2

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

9. Proposed Total Measured Depth: 8722

WELL LOCATION INFORMATION

10. QtrQtr: SWNE Sec: 12 Twp: 1S Rng: 68W Meridian: 6Latitude: 39.973720 Longitude: -104.946970
 Footage at Surface: 637 FNL/FSL FSL 1875 FEL/FWL FEL
11. Field Name: WATTENBERG Field Number: 9075012. Ground Elevation: 5147 13. County: ADAMS

14. GPS Data:

Date of Measurement: 06/23/2008 PDOP Reading: 2.4 Instrument Operator's Name: MICHAEL FEIGENBAUM15. 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 _____

1971 FSL 2012 FEL 1971 FSL 2012 FELSec: 12 Twp: 1S Rng: 68W Sec: 12 Twp: 1S Rng: 68W16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 255 ft18. Distance to nearest property line: 177 ft 19. Distance to nearest well permitted/completed in the same formation: 1341 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.)
DAKOTA	DKTA	318A	320	E/2
J SAND	JSND	318A	320	E/2
NIOBRARA/CODELL	NB-CD	318A	320	E/2

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):
E2, SEC 12, T1S, R68W, 6TH PM

25. Distance to Nearest Mineral Lease Line: 674 ft 26. Total Acres in Lease: 320

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	1,100	763	1,100	0
1ST	7+7/8	4+1/2	11.6	8,722	440	8,722	7,187

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

33. Comments REFILING EXPIRED PERMIT. NOTHING HAS CHANGED AT SURFACE LOCATION. NO CONDUCTOR CASING WILL BE USED, TWO LEASES HAVE BEEN FILED TO CREATE A SINGLE 320 ACRE DRILLING AND SPACING UNIT.

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: JAMES C. KARO

Title: LANDMAN Date: _____ Email: JAMES@JAMESKARO.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 05 001 09529 00	Permit Number: _____ Expiration Date: _____
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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
2585314	APD ORIGINAL	LF@2202664 2585314
2585315	WELL LOCATION PLAT	LF@2202665 2585315
2585316	TOPO MAP	LF@2202666 2585316
2585318	MINERAL LEASE MAP	LF@2202667 2585318
2585319	30 DAY NOTICE LETTER	LF@2202668 2585319
2585320	DEVIATED DRILLING PLAN	LF@2202669 2585320

Total Attach: 6 Files