

FORM
2A

Rev
04/01

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

Document Number:
2095016

Oil and Gas Location Assessment

New Location Amend Existing Location Location#: _____

Submit original plus one copy. This form is to be submitted to the COGCC prior to any ground disturbance activity associated with oil and gas development operations. This Assessment may be approved as a stand alone application or submitted as an informational report accompanying an Application for Permit-To-Drill, Form 2. Approval of this Assessment will allow for the construction of the below specified location; however, it does not supersede any land use rules applied by the local land use authority. This form may serve as notice to land owners and other interested parties, please see the COGCC web site at <http://colorado.gov/cogcc/> for all accompanying information pertinent to this Oil and Gas Location Assessment.

Location ID:

Expiration Date:

This location assessment is included as part of a permit application.

1. CONSULTATION

- This location is included in a Comprehensive Drilling Plan. CDP # _____
- This location is in a sensitive wildlife habitat area.
- This location is in a wildlife restricted surface occupancy area.
- This location includes a Rule 306.d.(1)A.ii. variance request.

2. Operator

Operator Number: 10303

Name: RUBICON OIL & GAS LLC

Address: 508 W WALL AVE STE 500

City: MIDLAND State: TX Zip: 79701

3. Contact Information

Name: KYLE HUDSON/AGENT

Phone: (303) 595-7626

Fax: (303) 595-7628

email: KHUDSON@RPM-INC.ORG

4. Location Identification:

Name: PAWNEE Number: 1-17-1

County: WELD

Quarter: SWSW Section: 17 Township: 10N Range: 66W Meridian: 6 Ground Elevation: 5540

Define a single point as a location reference for the facility location. This point should be used as the point of measurement in the drawings to be submitted with this application. When the location is to be used as a well site then the point shall be a well location.

Footage at surface: 243 feet, from North or South section line: FSL and 470 feet, from East or West section line: FWL

Latitude: 40.827213 Longitude: -104.808898 PDOP Reading: 3.0 Date of Measurement: 11/03/2009

5. Facilities (Indicate the number of each type of oil and gas facility planned on location):

Special Purpose Pits: <input type="text"/>	Drilling Pits: <input type="text" value="1"/>	Wells: <input type="text" value="1"/>	Production Pits: <input type="text" value="1"/>	Dehydrator Units: <input type="text"/>
Condensate Tanks: <input type="text" value="1"/>	Water Tanks: <input type="text" value="1"/>	Separators: <input type="text" value="1"/>	Electric Motors: <input type="text" value="1"/>	Multi-Well Pits: <input type="text"/>
Gas or Diesel Motors: <input type="text"/>	Cavity Pumps: <input type="text"/>	LACT Unit: <input type="text"/>	Pump Jacks: <input type="text" value="1"/>	Pigging Station: <input type="text"/>
Electric Generators: <input type="text"/>	Gas Pipeline: <input type="text" value="1"/>	Oil Pipeline: <input type="text"/>	Water Pipeline: <input type="text"/>	Flare: <input type="text" value="1"/>
Gas Compressors: <input type="text"/>	VOC Combustor: <input type="text"/>	Oil Tanks: <input type="text" value="2"/>	Fuel Tanks: <input type="text"/>	

Other:

6. Construction:

Date planned to commence construction: 03/01/2010 Size of disturbed area during construction in acres: 3.00
Estimated date that interim reclamation will begin: 05/01/2010 Size of location after interim reclamation in acres: 1.00
Estimated post-construction ground elevation: 5540 Will a closed loop system be used for drilling fluids: Yes
Will salt sections be encountered during drilling: Yes No X Is H2S anticipated? Yes No
Will salt (>15,000 ppm TDS Cl) or oil based muds be used: Yes No X
Mud disposal: Offsite Onsite X Method: Land Farming Land Spreading X Disposal Facility
Other:

7. Surface Owner:

Name: DEPORTER RANCH, INC. Phone:
Address: 14503 WELD COUNTY ROAD 108 Fax:
Address: Email:
City: NUNN State: CO Zip: 80648 Date of Rule 306 surface owner consultation:
Surface Owner: X Fee State Federal Indian
Mineral Owner: X Fee State Federal Indian
The surface owner is: the mineral owner committed to an oil and gas lease
is the executer of the oil and gas lease the applicant
The right to construct the location is granted by: oil and gas lease X Surface Use Agreement Right of Way
applicant is owner
Surface damage assurance if no agreement is in place: \$2000 \$5000 Blanket Surety ID

8. Reclamation Financial Assurance:

X Well Surety ID: 2009 Gas Facility Surety ID: Waste Mgnt. Surety ID:

9. Cultural:

Is the location in a high density area (Rule 603.b.): Yes No X
Distance, in feet, to nearest building: 2100 , public road: 470 , above ground utilit: 210
, railroad: 10000 , property line: 243

10. Current Land Use (Check all that apply):

Crop Land: Irrigated Dry land Improved Pasture Hay Meadow CRP
Non-Crop Land: X Rangeland Timber Recreational Other (describe):
Subdivided: Industrial Commercial Residential

11. Future Land Use (Check all that apply):

Crop Land: Irrigated Dry land Improved Pasture Hay Meadow CRP
Non-Crop Land: X Rangeland Timber Recreational Other (describe):
Subdivided: Industrial Commercial Residential

12. Soils:

List all soil map units that occur within the proposed location. Attach the National Resource Conservation Service (NRCS) report showing the "Map Unit Description" report listing the soil typical vertical profile. This data is to used when segregating topsoil.

The required information can be obtained from the NRCS web site at <http://soildatamart.nrcs.usda.gov/> or from the COGCC web site GIS Online map page found at <http://colorado.gov/cogcc>. Instructions are provided within the COGCC web site help section.

NRCS Map Unit Name: ASCAION FINE SANDY LOAN

NRCS Map Unit Name: _____

NRCS Map Unit Name: _____

13. Plant Community:

Complete this section only if any portion of the disturbed area of the location's current land use is on non-crop land.

Are noxious weeds present: Yes No

Plant species from: NRCS or, field observation Date of observation: 11/03/2009

List individual species: _____

Check all plant communities that exist in the disturbed area.

- Disturbed Grassland (Cactus, Yucca, Cheatgrass, Rye)
- Native Grassland (Bluestern, Grama, Wheatgrass, Buffalograss, Fescue, Oatgrass, Brome)
- Shrub Land (Mahogany, Oak, Sage, Serviceberry, Chokecherry)
- Plains Riparian (Cottonwood, Willow, Aspen, Maple, Poplar, Russian Olive, Tamarisk)
- Mountain Riparian (Cottonwood, Willow, Blue Spruce)
- Forest Land (Spruce, Fir, Ponderosa Pine, Lodgepole Pine, Juniper, Pinyon, Aspen)
- Wetlands Aquatic (Bullrush, Sedge, Cattail, Arrowhead)
- Alpine (above timberline)
- Other (describe): _____

14. Water Resources:

Rule 901.e. may require a sensitive area determination be performed. If this determination is performed the data is to be submitted with the Form 2A.

Is this a sensitive area: No Yes Was a Rule 901.e. Sensitive Areas Determination performed: No Yes

Distance (in feet) to nearest surface water: 4400, water well: 330, depth to ground water: 123

Is the location in a riparian area: No Yes Was an Army Corps of Engineers Section 404 permit filed No Yes

Is the location within a Rule 317B Surface Water Suppl Area buffer zone:

No 0-300 ft. zone 301-500 ft. zone 501-2640 ft. zone

If the location is within a Rule 317B Surface Water Supply Area buffer have all public water supply systems within 15 miles been notified: No Yes

15. Comments:

THIS IS A HORIZONTAL WELL. ALL VISIBLE IMPROVEMENTS WITHIN 400 FEET OF THE PROPOSED LOCATION ARE SHOWN ON THE ATTACHED EXHIBITS.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.

Signed: _____ Date: _____ Email: KHUDSON@RPM-INC.ORG

Print Name: KYLE HUDSON Title: AGENT

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: _____

Attachment Check List

Att Doc Num	Name	Doc Description
2095016	FORM 2A	LF@2218565 2095016
2095024	LOCATION PICTURES	LF@2218553 2095024
2095025	LOCATION DRAWING	LF@2218566 2095025
2095026	HYDROLOGY MAP	LF@2218567 2095026
2095027	ACCESS ROAD MAP	LF@2218568 2095027
2095028	REFERENCE AREA MAP	LF@2218569 2095028
2095029	REFERENCE AREA PICTURES	LF@2218552 2095029
2095030	NRCS MAP UNIT DESC	LF@2218570 2095030
2095031	CONST. LAYOUT DRAWINGS	LF@2218571 2095031
2095032	OTHER	LF@2218572 2095032

Total Attach: 10 Files