

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:

2095370

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: WELLSTAR CORPORATION

4. COGCC Operator Number: 95245

5. Address: 11990 GRANT ST STE 550

City: NORTHGLENN State: CO Zip: 80233

6. Contact Name: TERRY L. HOFFMAN Phone: (303)250-0619 Fax: (303)412-8212

Email: TLHOFFMAN@Q.COM

7. Well Name: FEDERAL Well Number: 9-1

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

9. Proposed Total Measured Depth: 8100

WELL LOCATION INFORMATION

10. QtrQtr: SWNE Sec: 9 Twp: 8N Rng: 78W Meridian: 6

Latitude: 40.680322 Longitude: -106.148361

Footage at Surface: 2056 FNL/FSL FNL 2026 FEL/FWL FEL

11. Field Name: WILDCAT Field Number: 99999

12. Ground Elevation: 8416.1 13. County: JACKSON

14. GPS Data:

Date of Measurement: 07/18/2008 PDOP Reading: 2.0 Instrument Operator's Name: SCOTT VERNON

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: 550 ft

18. Distance to nearest property line: 3385 ft 19. Distance to nearest well permitted/completed in the same formation: 1 mi

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.)
FRONTIER	FRTR			
NIOBRARA	NBRR			

21. Mineral Ownership: ☐ Fee ☐ State ☒ Federal ☐ Indian Lease #: COC 062573

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):
T8N R78W: SEC 9 - ALL, SEC 10- ALL, SEC 11 - W/2NW, SW/4

25. Distance to Nearest Mineral Lease Line: 2056 ft 26. Total Acres in Lease: 1520

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
CONDUCTOR	20	16	42	60	7	60	
SURF	12+1/4	9+5/8	36	825	365	825	
1ST	8+3/4	7	26	7,180	130	7,180	5,680
1ST LINER	6	4+1/2	11.6	8,100	65	8,100	7,030

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

33. Comments ALL CONDITIONS ARE THE SAME AS WHEN THE APD WAS ORIGINALLY APPROVED

34. Location ID: 324762

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: TERRY L. HOFFMAN

Title: PERMIT AGENT Date: 2/2/2010 Email: TLHOFFMAN@Q.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

05 057 06477 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
2095370	APD ORIGINAL	LF @ 2221999 2095370
400038506	FORM 2 SUBMITTED	400038506.pdf

Total Attach: 2 Files