

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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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:
2095300
Plugging Bond Surety

3. Name of Operator: QUICKSILVER RESOURCES INC 4. COGCC Operator Number: 10255

5. Address: 777 WEST ROSEDALE
City: FT WORTH State: TX Zip: 76104

6. Contact Name: LISA SMITH Phone: (303)857-9999 Fax: (303)450-9200
Email: LSPERMITCO@AOL.COM

7. Well Name: CHEROKEE RIDGE Well Number: 27-31

8. Unit Name (if appl): CHEROKEE RIDGE Unit Number: COC72660X

9. Proposed Total Measured Depth: 16500

WELL LOCATION INFORMATION

10. QtrQtr: NWNE Sec: 27 Twp: 12N Rng: 95W Meridian: 6
Latitude: 40.975119 Longitude: -108.045528

Footage at Surface: 1319 FNL/FSL FNL 1622 FEL/FWL FEL

11. Field Name: WILDCAT Field Number: 99999

12. Ground Elevation: 6279.8 13. County: MOFFAT

14. GPS Data:

Date of Measurement: 10/13/2009 PDOP Reading: 1.7 Instrument Operator's Name: LUCAS KAY

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: 1 mi

18. Distance to nearest property line: 1319 ft 19. Distance to nearest well permitted/completed in the same formation: 2 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.)
MANCOS	MNCS			

21. Mineral Ownership: Fee State Federal Indian Lease #: cOC61504

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):
 T12N-R95W: SEC. 27: E/2, E/2 W/2, SW NW, W/2 SW; SEC. 28: S/2 NE, W/2 SE

25. Distance to Nearest Mineral Lease Line: 1319 ft 26. Total Acres in Lease: 1160

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 & BURIAL

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	17+1/2	13+3/8	68	2,500	1,680	2,500	0
1ST	12+1/4	9+5/8	53.5	12,250	2,240	12,250	2,000
2ND	8+3/4	5+1/2	26	16,500	550	14,750	12,000

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

33. Comments NO CONDUCTOR CASING WILL BE SET.

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: VENESSA LANGMACHER

Title: REGULATORY Date: 2/1/2010 Email: LSPERMITCO@AOL.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: _____

Permit Number: _____ Expiration Date: _____

API NUMBER
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
2095300	APD ORIGINAL	LF@2221781 2095300
2095302	WELL LOCATION PLAT	LF@2221782 2095302
2095304	FED. DRILLING PERMIT	LF@2221783 2095304
2095305	DRILLING PLAN	LF@2221784 2095305
2095306	SURFACE PLAN	LF@2221785 2095306
400038499	FORM 2 SUBMITTED	400038499.pdf

Total Attach: 6 Files