

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
----	----	----	----

Document Number:
400046085
Plugging Bond Surety
20070091

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: UNIOIL 4. COGCC Operator Number: 90950

5. Address: 1775 SHERMAN ST STE 3000
City: DENVER State: CO Zip: 80203

6. Contact Name: Sarah Garrett Phone: (303)860-5803 Fax: (303)860-5838
Email: sgarrett@petd.com

7. Well Name: Binder Well Number: 10-ADU

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

9. Proposed Total Measured Depth: 7545

WELL LOCATION INFORMATION

10. QtrQtr: SWNW Sec: 10 Twp: 4N Rng: 67W Meridian: 6
Latitude: 40.329400 Longitude: -104.885300

Footage at Surface: 1769 FNL/FSL FNL 373 FEL/FWL FWL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 4760 13. County: WELD

14. GPS Data:

Date of Measurement: 10/31/2008 PDOP Reading: 6.0 Instrument Operator's Name: Thomas G Carlson

15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL FNL FNL FEL/FWL FEL/FWL
1317 FNL 1320 FWL 1317 FNL 1320 FWL
Sec: 9 Twp: 4N Rng: 67W Sec: 9 Twp: 4N Rng: 67W

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: 361 ft

18. Distance to nearest property line: 118 ft 19. Distance to nearest well permitted/completed in the same formation: 975 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 Codell	NBCD	407-87	80	W2NW4
Sussex Shannon	SXSN	N/A	80	W2NW4

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#: 20070028

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):
N/2 Sec. 10, T4N, R67W

25. Distance to Nearest Mineral Lease Line: 373 ft 26. Total Acres in Lease: 270

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	450	270	450	0
S.C. 1.1	7+7/8	4+1/2	10.5	7,545	220	7,545	6,300

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

33. Comments Conductor casing will not be used. Well will be on the same pad as the Binder 12-10D U, and the Binder 11-10D U.

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: Sarah Garrett

Title: Landman Date: 3/10/2010 Email: sgarrett@petd.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	Permit Number: _____	Expiration Date: _____
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
400046152	PLAT	Binder 10A-DU Plat.pdf
400046153	30 DAY NOTICE LETTER	Binder_N2-10-4-67_Not Ltr_082109_scan.pdf
400046158	DEVIATED DRILLING PLAN	Binder 10-ADU Directional.pdf
400046160	EXCEPTION LOC WAIVERS	Binder 11-10DU,12-10DU,10ADU Surface Loc. Waiver 12-10-09.pdf
400046165	EXCEPTION LOC REQUEST	Binder 10-ADU SLW Letter to Director.pdf
400046166	EXCEPTION LOC WAIVERS	Binder 11-10DU, 12-10U, 10ADU - PLW.pdf
400046167	EXCEPTION LOC REQUEST	Binder 10-ADU PLW Letter to Director.pdf
400046170	SURFACE AGRMT/SURETY	Binder Memo of SUA.pdf
400046178	TOPO MAP	Binder 10A-DU Topo.pdf

Total Attach: 9 Files