

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:
400036786
Plugging Bond Surety
20070019

3. Name of Operator: ORR ENERGY LLC 4. COGCC Operator Number: 10154

5. Address: 1813 61ST AVE STE 200
City: GREELEY State: CO Zip: 80634

6. Contact Name: Virginia Lopez Phone: (303)928-7128 Fax: (303)423-8765
Email: virginia@petro-fs.com

7. Well Name: AG Well Number: 32-31D

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

9. Proposed Total Measured Depth: 7860

WELL LOCATION INFORMATION

10. QtrQtr: NENE Sec: 32 Twp: 6N Rng: 66W Meridian: 6
Latitude: 40.449994 Longitude: -104.799627

Footage at Surface: 459 FNL/FSL FNL 759 FEL/FWL FEL

11. Field Name: Bracewell Field Number: 7487

12. Ground Elevation: 4712 13. County: WELD

14. GPS Data:

Date of Measurement: 01/08/2010 PDOP Reading: 6.0 Instrument Operator's Name: Travis Kraich

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

Footage at Top of Prod Zone: FNL/FSL 459 FNL 759 FEL 665 FNL 2009 FEL
Sec: 32 Twp: 6N Rng: 66W Sec: 32 Twp: 6N Rng: 66W

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: 280 ft

18. Distance to nearest property line: 179 ft 19. Distance to nearest well permitted/completed in the same formation: 1600 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.)
J Sand	JSND	UNSPACED	40	NWNE
Niobrara-Codell	NB-CD	381-5	80	N/2NE

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):
NE 1/4 of Section 32

25. Distance to Nearest Mineral Lease Line: 444 ft 26. Total Acres in Lease: 160

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	750	550	750	
1ST	7+7/8	4+1/2	11.6	7,850	650	7,850	

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

33. Comments Appllication is in a Comprehensive Drilling Plan: NO; E-FORMS does not have a NO checkbox.

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: Virginia Lopez

Title: Regulatory Technician Date: 2/16/2010 Email: virginia@petro-fs.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
400039280	DEVIATED DRILLING PLAN	Orr Energy AG 32-31D Plan #1 2-10-10.pdf
400039296	PLAT	AG 32-31D 6N66W32 Plat.pdf
400039344	TOPO MAP	AG 32-31D Topo.pdf
400039361	30 DAY NOTICE LETTER	AG 30 Day Notice Letter.pdf
400043693	SURFACE AGRMT/SURETY	Surface Use Agreement_Orr Energy.pdf
400046913	EXCEPTION LOC REQUEST	Exception Location Request Letter.pdf
400046914	EXCEPTION LOC WAIVERS	Exception Location Waiver.pdf
400047962	FORM 2 SUBMITTED	400047962.pdf

Total Attach: 8 Files