

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:
400043544
Plugging Bond Surety
20090040

3. Name of Operator: FRAM OPERATING LLC 4. COGCC Operator Number: 10310

5. Address: 30 E PIKES PEAK AVE STE 283
City: COLORADO State: CO Zip: 80903
SPRINGS

6. Contact Name: Harold Mayland Phone: (719)593-8787 Fax: (719)314-1362
Email: harold.mayland@framexploration.no

7. Well Name: Federal Well Number: 12-1A-I

8. Unit Name (if appl): Whitewater Unit Unit Number: COC61718X

9. Proposed Total Measured Depth: 6130

WELL LOCATION INFORMATION

10. QtrQtr: SWNW Sec: 12 Twp: 12S Rng: 98W Meridian: 6
Latitude: 39.024240 Longitude: -108.303570

Footage at Surface: 1927 FNL/FSL FNL 562 FEL/FWL FWL

11. Field Name: WHITEWATER Field Number: 92840

12. Ground Elevation: 5867 13. County: MESA

14. GPS Data:

Date of Measurement: 07/16/2001 PDOP Reading: 6.0 Instrument Operator's Name: JEFF FLETCHER

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

Footage at Top of Prod Zone: FNL/FSL 2303 FNL 1069 FWL 1719 FSL 2641 FEL
Bottom Hole: FNL/FSL 1719 FSL 2641 FEL
Sec: 12 Twp: 12S Rng: 98W Sec: 12 Twp: 12S Rng: 98W

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: 1998 19. Distance to nearest well permitted/completed in the same formation: 171 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.)
dakota	dkta	376-1	320	w/2

21. Mineral Ownership: Fee State Federal Indian Lease #: COC-61718

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):
See map

25. Distance to Nearest Mineral Lease Line: 1914 ft 26. Total Acres in Lease: 2230

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: air drilling

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	16	14		40		40	0
SURF	11	8+5/8	24	485	100	485	0
1ST	7+7/8	5+1/2	14	3,578	500	3,578	2,000

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

33. Comments There is no change to the surrounding land use, well construction plan and the mineral lease description. The well site has been built.

34. Location ID: 334479

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: Harold Mayland

Title: Oper Mgr Date: 2/26/2010 Email: harold.mayland@framoperating

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 05 077 09331 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
400047634	FORM 2 SUBMITTED	400047634.pdf

Total Attach: 1 Files