

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:

400053394

Plugging Bond Surety

20090062

3. Name of Operator: MACHII-ROSS PETROLEUM CO 4. COGCC Operator Number: 522505. Address: 2901 28TH ST STE 205City: SANTA MONICA State: CA Zip: 904056. Contact Name: CLAYTON DOKE Phone: (970)669-7411 Fax: (970)669-4077Email: CLAY.DOKE@GMAIL.COM7. Well Name: BERGER Well Number: 41-23J

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

9. Proposed Total Measured Depth: 8076

WELL LOCATION INFORMATION

10. QtrQtr: NENE Sec: 23 Twp: 2N Rng: 68W Meridian: 6Latitude: 40.129750 Longitude: -104.963140Footage at Surface: 614 FNL/FSL FNL 601 FEL/FWL FEL11. Field Name: SPINDLE Field Number: 7790012. Ground Elevation: 4913 13. County: WELD

14. GPS Data:

Date of Measurement: 08/06/2008 PDOP Reading: 1.2 Instrument Operator's Name: MARK ANGELL15. 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 No17. Distance to the nearest building, public road, above ground utility or railroad: 601 ft18. Distance to nearest property line: 601 ft 19. Distance to nearest well permitted/completed in the same formation: 1369 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.)
CODELL	CODL	407-87	80	E/2 NE/4
J SAND	JSND	232-23	320	E/2
NIOBRARA	NBRR	407-87	80	E/2 NE/4

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#: 2009063

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):
T2N, R68W, SEC, 23; NE/4

25. Distance to Nearest Mineral Lease Line: 601 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	540	750	0
1ST	7+7/8	4+1/2	11.6	8,072	230	8,072	6,722
			Stage Tool	5,045	250	5,045	4,645

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

33. Comments NO CONDUCTOR CASING WILL BE RUN. THERE ARE NO CHANGES RELATIVE TO THE PREVIOUSLY APPROVED PERMIT. THIS WELL TWINS THE EXISTING BERGER 41-23. NO ATTACHMENTS HAVE BEEN INCLUDED PER OPERATOR GUIDANCE FOR REFILES.

34. Location ID: 318171

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: CLAYTON DOKE

Title: ENGINEER Date: _____ Email: CLAY.DOKE@GMAIL.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

05 132 30270 00

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.