

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 ☐ Pilot HoleSINGLE ZONE ☐ MULTIPLE ZONE ☐ COMMINGLE ZONE ☐Refiling ☐Sidetrack ☐

Document Number:

400056635

Plugging Bond Surety

20090003

3. Name of Operator: RUBICON OIL &amp; GAS LLC

4. COGCC Operator Number: 10303

5. Address: 508 W WALL AVE STE 500

City: MIDLAND State: TX Zip: 79701

6. Contact Name: Venessa Langmacher Phone: (303)857-9999 Fax: (303)450-9200

Email: vllpermitco@aol.com

7. Well Name: Pawnee Well Number: 1-2-1

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

9. Proposed Total Measured Depth: 8700

## WELL LOCATION INFORMATION

10. QtrQtr: Lot 4 Sec: 2 Twp: 10N Rng: 66W Meridian: 6

Latitude: 40.868409 Longitude: -104.749718

Footage at Surface: 654 FNL/FSL FNL 1001 FEL/FWL FWL

11. Field Name: Wildcat Field Number: 99999

12. Ground Elevation: 5506.6 13. County: WELD

## 14. GPS Data:

Date of Measurement: 04/02/2010 PDOP Reading: 1.6 Instrument Operator's Name: GNA

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: 654 ft

18. Distance to nearest property line: 654 ft 19. Distance to nearest well permitted/completed in the same formation: 14256 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			
J Sand	JSND			
Niobrara	NBRR			

21. Mineral Ownership: ☐ Fee ☒ State ☐ Federal ☐ Indian Lease #: 8710.5

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):  
T10N-R66W: Sec. 2: Lots 1-4, S/2 NE, W/2 SW, N/2 SE

25. Distance to Nearest Mineral Lease Line: 654 ft 26. Total Acres in Lease: 398

### 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 and 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.

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

33. Comments No casing will be set. This is a pilot hole submitted for informational purposes only.

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 Supervisor Date: \_\_\_\_\_ Email: vllpermitco@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: \_\_\_\_\_

**API NUMBER**

05

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
400056700		Plat.pdf

Total Attach: 1 Files