

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:
1760686
Plugging Bond Surety
20100013

3. Name of Operator: SCHNEIDER ENERGY SERVICES INC 4. COGCC Operator Number: 76840

5. Address: P O BOX 297
 City: FORT MORGAN State: CO Zip: 80701

6. Contact Name: JEFF SCHNEIDER Phone: (970)867-9437 Fax: (970)867-9134
 Email: JEFF@SCHNEIDERENERGY.COM

7. Well Name: DUNN Well Number: 10-22A

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

9. Proposed Total Measured Depth: 3100

WELL LOCATION INFORMATION

10. QtrQtr: SEW Sec: 10 Twp: 2S Rng: 50W Meridian: 6

Latitude: 39.897630 Longitude: -102.965480

Footage at Surface: 2005 FNL/FSL FNL 2065 FEL/FWL FWL

11. Field Name: WHITE EAGLE Field Number: 92798

12. Ground Elevation: 4477 13. County: WASHINGTON

14. GPS Data:

Date of Measurement: 03/04/2010 PDOP Reading: 1.6 Instrument Operator's Name: DARREN VEAL

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: 1250 ft

18. Distance to nearest property line: 587 ft 19. Distance to nearest well permitted/completed in the same formation: 2917 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	NBRR			

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):
W/2-10-T2S-R50W

25. Distance to Nearest Mineral Lease Line: 587 ft 26. Total Acres in Lease: 320

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	9+7/8	7	20	370	175	370	0
1ST	6+1/4	4+1/2	10.5	3,100	200	3,100	2,000

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

33. Comments REPLACEMENT WELL FOR THE DUNN #10-22 (API #05-121-10147) WHICH HAS BEEN PLUGGED. No Conductor casing will be used.

34. Location ID: 317273

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: GLENN A. MILLER

Title: ENGINEER Date: 3/30/2010 Email: GLNMIR5@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: David S. Neslin Director of COGCC Date: 4/30/2010

API NUMBER 05 121 10996 00	Permit Number: _____	Expiration Date: <u>4/29/2012</u>
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.

COGCC ENG COA – SME 1) Provide 24 hour notice of MIRU to Colby Horton at 970-467-2517 or Colby.horton@state.co.us. 2) If completed, provide cement coverage from TD to a minimum of 200' above Niobrara. Verify coverage with cement bond log. 3) If dry hole, 40 sks cement 50' above Niobrara top, 50 sks cement ½ out, ½ in surface casing, 10 sks cement top of surface casing, cut 4' below GL, weld on plate, 5 sks cement in rat hole & 5 sks cement in mouse hole. Restore surface location.

Attachment Check List

Att Doc Num	Name	Doc Description
1725777	SURFACE CASING CHECK	LF@2457594 1725777
1760686	APD ORIGINAL	LF@2444578 1760686
1760687	PLAT	LF@2444579 1760687
1760688	SURFACE AGRMT/SURETY	LF@2446767 1760688

Total Attach: 4 Files