

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:
2094721
Plugging Bond Surety
20090074

3. Name of Operator: GUNNISON ENERGY CORPORATION 4. COGCC Operator Number: 100122

5. Address: 1601 FORUM PL STE 1400
City: WEST PALM BEACH State: FL Zip: 33401

6. Contact Name: LEE FYOCK Phone: (303)296-4222 Fax: (303)296-4555
Email: LEE.FYOCK@OXBOW.COM

7. Well Name: IRON POINT UNIT HOTCHKISS 1294 Well Number: 13-24D

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

9. Proposed Total Measured Depth: 8520

WELL LOCATION INFORMATION

10. QtrQtr: SESW Sec: 13 Twp: 12S Rng: 91W Meridian: 6
Latitude: 39.007200 Longitude: -107.503633

Footage at Surface: 103 FNL/FSL FNL 2548 FEL/FWL FWL

11. Field Name: WILDCAT Field Number: 99999

12. Ground Elevation: 7851 13. County: DELTA

14. GPS Data:

Date of Measurement: 11/09/2009 PDOP Reading: 1.8 Instrument Operator's Name: ROBERT L. KAY

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: 5750 ft

18. Distance to nearest property line: 1746 ft 19. Distance to nearest well permitted/completed in the same formation: 5280 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.)
MANCOS	MNCS			

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):
SEE ATTACHED LEASE DESCRIPTION

25. Distance to Nearest Mineral Lease Line: 1215 ft 26. Total Acres in Lease: 1954

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: PIT

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	26	20		60		60	0
SURF	17+1/2	13+3/8	54.5	800	585	800	0
1ST	12+1/4	9+55/8	40	4,250	985	4,250	0
2ND	9+7/8	7	26	8,520	945	8,520	3,750

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

33. Comments _____

34. Location ID: 322013

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: LEE FYOCK

Title: DIRECTOR Date: 1/19/2010 Email: LEE.FYOCK@OXBROW.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: 3/19/2010

API NUMBER
05 029 06107 00

Permit Number: _____ Expiration Date: 3/17/2012

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.

1)24 HOUR SPUD NOTICE REQUIRED. E-MAIL: Shaun.Kellerby@state.co.us 2)CEMENT TOP VERIFICATION BY CBL REQUIRED. 3)THE PROPOSED SURFACE CASING IS MORE THAN 50' BELOW THE DEPTH OF THE DEEPEST WATER WELL WITHIN 1MILE OF THE SURFACE LOCATION WHEN CORRECTED FOR ELEVATION DIFFERENCES. THE DEEPEST WATER WELL WITHIN 1 MILE IS 000 FEET DEEP.

Attachment Check List

Att Doc Num	Name	Doc Description
2094725	MINERAL LEASE MAP	LF@2216687 2094725
2585660	WELL LOCATION PLAT	LF@2280793 2585660
2585667	30 DAY NOTICE LETTER	LF@2280795 2585667
400031561	FORM 2 SUBMITTED	LF@2327904 400031561

Total Attach: 4 Files