

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:
1775075
Plugging Bond Surety
20070019

3. Name of Operator: ORR ENERGY LLC 4. COGCC Operator Number: 10154

5. Address: 1813 61ST AVE STE 200
City: GREELEY State: CO Zip: 80634

6. Contact Name: Cheryl Johnson Phone: (303)928-7128 Fax: (303)423-8765
Email: cheryl@petro-fs.com

7. Well Name: HALL Well Number: 25-34

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

9. Proposed Total Measured Depth: 7700

WELL LOCATION INFORMATION

10. QtrQtr: SWSE Sec: 25 Twp: 6N Rng: 67W Meridian: 6
Latitude: 40.452000 Longitude: -104.838910

Footage at Surface: 474 FNL/FSL FSL 1794 FEL/FWL FEL

11. Field Name: LAPOUDRE SOUTH Field Number: 48130

12. Ground Elevation: 4727 13. County: WELD

14. GPS Data:

Date of Measurement: 12/04/2009 PDOP Reading: 0.2 Instrument Operator's Name: STEVEN J STENCEL

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: 500 ft

18. Distance to nearest property line: 474 19. Distance to nearest well permitted/completed in the same formation: 1341 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.)
JSNDCODLNIOUSUS	JNCSS		80	W/2SE4

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):
T6NR67W SEC.25: SW/NE, W2/SE4

25. Distance to Nearest Mineral Lease Line: 474 26. Total Acres in Lease: 120

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	800	350	800	0
1ST	7+7/8	4+1/2	11.6	7,700	750	7,700	

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

33. Comments ITEM 34. LOCATION ID: PENDING

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: VIRGINIA L. LOPEZ

Title: REG ANALYST Date: 12/7/2009 Email: VIRGINIA@PETRO-FS.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. Nashin Director of COGCC Date: 1/26/2010

API NUMBER
05 123 31078 00

Permit Number: _____ Expiration Date: 1/25/2012

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) Provide 24 hour notice of MIRU to Ed Binkley at 970-506-9834 or e-mail at ed.binkley@state.co.us 2) Comply with Rule 317.i and provide cement coverage from TD to a minimum of 200' above Niobrara and from 200' below Sussex to 200' above Sussex. Verify coverage with cement bond log.

Location is more than 50 feet from existing well, exception granted

Location is more than 50 feet from existing well, exception granted

Attachment Check List

Att Doc Num	Name	Doc Description
1769736	SURFACE CASING CHECK	LF@2213983 1769736.00000
1775075	APD ORIGINAL	LF@2198848 1775075
2585208	TOPO MAP	LF@2198852 2585208
2585209	WELL LOCATION PLAT	LF@2198850 2585209
2585210	30 DAY NOTICE LETTER	LF@2198849 2585210
2585215	EXCEPTION LOC REQUEST	LF@2199358 2585215
2585216	EXCEPTION LOC WAIVERS	LF@2199359 2585216
400020399	FORM 2 SUBMITTED	LF@2199446 400020399

Total Attach: 8 Files