

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

Refilling
Sidetrack

Document Number:
2582247
Plugging Bond Surety
20030070

3. Name of Operator: CONQUEST OIL COMPANY 4. COGCC Operator Number: 19170

5. Address: 8207 W 20TH STREET - SUITE B
City: GREELEY State: CO Zip: 80634

6. Contact Name: TED PAGANO Phone: (970)590-3944 Fax: (303)595-1530
Email: THEODOREPAGANO@YAHOO.COM

7. Well Name: HIGHPOINT Well Number: 23-19 #2

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

9. Proposed Total Measured Depth: 6805

WELL LOCATION INFORMATION

10. QtrQtr: NESW Sec: 19 Twp: 11S Rng: 50W Meridian: 6
Latitude: 39.072080 Longitude: -103.043080

Footage at Surface: 1353 FNL/FSL FSL 2297 FEL/FWL FWL

11. Field Name: SPEAKER Field Number: 77825

12. Ground Elevation: 5052.04 13. County: KIT CARSON

14. GPS Data:

Date of Measurement: 04/05/2010 PDOP Reading: 2.4 Instrument Operator's Name: KEITH WESTFALL

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: 2297 ft

18. Distance to nearest property line: 1353 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.)
ATOKA	ATOK			
CHEROKEE	CHRK			
MARMATON	MRTN			
MORROW	MRRW			

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#: 20100087

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):
SEC, 19: ALL, T11SS, R50W

25. Distance to Nearest Mineral Lease Line: 1353 ft 26. Total Acres in Lease: 640

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	511	310	511	0
1ST	7+7/8	5+1/2	17	6,805	325	6,805	4,500

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

33. Comments NO CONDUCTOR CASING WILL BE USED. Change Zone Type from Single to Multiple per phone call from Ted Pagano 5-17-10 JLV

34. Location ID: 385216

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: TED PAGANO

Title: AGENT Date: 4/16/2010 Email: THEODOREPAGANO@YAHO

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: 5/21/2010

API NUMBER 05 063 06280 00	Permit Number: _____	Expiration Date: 5/20/2012
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 Craig Quint at 719-767-8939 or e-mail at craig.quint@state.co.us.
- 2) If production casing is set provide cement coverage to at least 200' above shallowest completed interval and stage cement Cheyenne/Dakota interval (3500'-2880' minimum). Run and submit CBL to verify all cemented intervals.
- 3) If well is a dry hole set plugs at the following depths: 40 sks cement +/- 50' above the Morrow, 40 sks cement across any DST w/ show, 40 sks cement 100' below Cheyenne (3500' up), 40 sks cement 50' above top of Dakota (2880' up), 50 sks cement from 50' below surface casing shoe up into surface casing, 15 sks cement in top of surface casing, cut 4 ft below GL, weld on plate, 5 sks cement each in rat hole and mouse hole.

Attachment Check List

Att Doc Num	Name	Doc Description
2553547	SURFACE CASING CHECK	LF@2474694 2553547
2582247	APD ORIGINAL	LF@2454462 2582247
2582248	WELL LOCATION PLAT	LF@2454463 2582248
2582259	TOPO MAP	LF@2454494 2582259
2582260	30 DAY NOTICE LETTER	LF@2454464 2582260
2582261	30 DAY NOTICE LETTER	LF@2454465 2582261

Total Attach: 6 Files