

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:
2582953
Plugging Bond Surety
19860025

3. Name of Operator: TOP OPERATING COMPANY 4. COGCC Operator Number: 39560

5. Address: 10881 ASBURY AVE STE 230
City: LAKEWOOD State: CO Zip: 80227

6. Contact Name: MURRAY J. HERRING Phone: (303)727-9915 Fax: (303)727-9925
Email: TOPOPRTNG@AOL.COM

7. Well Name: RIDER Well Number: 1

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

9. Proposed Total Measured Depth: 7265

WELL LOCATION INFORMATION

10. QtrQtr: NESE Sec: 36 Twp: 3N Rng: 69W Meridian: 6
Latitude: 40.178886 Longitude: -105.058699

Footage at Surface: 1650 FNL/FSL FSL 990 FEL/FWL FEL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 4972 13. County: BOULDER

14. GPS Data:

Date of Measurement: 07/05/2010 PDOP Reading: 2.4 Instrument Operator's Name: R.K. HERRING

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: 990 ft

18. Distance to nearest property line: 990 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.)
J SAND	JSND		160	SE/4
NIOBRARA-CODELL	NB-CD	407-66	160	SE/4

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):
SE/4 SEC. 36 T3N R69W 6TH PM

25. Distance to Nearest Mineral Lease Line: 990 ft 26. Total Acres in Lease: 200

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	200	200	200	0
1ST	8+5/8	4+1/2	10.5	7,265	200	7,265	0

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

33. Comments WELL IS COMPLETED IN J-SAND. WILL COMPLETE IN CODELL. TOP OF CEMENT WILL BE FOUND W/CBL. CEMENT WILL BE 200' ABOVE NIOBRARA.

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: MURRAY J. HERRING

Title: VICE PRESIDENT Date: 7/7/2010 Email: TOPOPRTNG@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: 8/10/2010

API NUMBER
05 013 06096 00

Permit Number: _____ Expiration Date: 8/9/2012

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.

Prior to recomple, operator must provide cement 200' above Niobrara (minimum cement top of 6170') and 400' into the surface casing. Verify remedial cement coverage with cement bond log to surface.

Attachment Check List

Att Doc Num	Name	Doc Description
2582953	APD ORIGINAL	LF@2503468 2582953

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	PERMITTING PASSED 8-5-10; Per Murray Herring, well is straight hole, removed directional footages of the productive interval from application. Because application is a recomple, changed 22b from "SUA is attached" to "N/A". PVG 8-5-10	8/5/2010 2:14:51 PM

Total: 1 comment(s)

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