

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:
2583224
Plugging Bond Surety
20060014

3. Name of Operator: KLABZUBA OIL & GAS INC 4. COGCC Operator Number: 10148

5. Address: 930 WEST 1ST ST 4TH FLR
City: FT WORTH State: TX Zip: 76102

6. Contact Name: MIKE COLLOM Phone: (303)382-2172 Fax: (303)299-9087
Email: MCOLLOM@KLABZUBA.COM

7. Well Name: R.Y. DAVIS Well Number: 5

8. Unit Name (if appl): ADENA J SAND Unit Number: _____

9. Proposed Total Measured Depth: 5645

WELL LOCATION INFORMATION

10. QtrQtr: SENE Sec: 6 Twp: 1N Rng: 57W Meridian: 6
Latitude: 40.080913 Longitude: -103.793948

Footage at Surface: 2310 FNL/FSL FNL 379 FEL/FWL FEL

11. Field Name: ADENA Field Number: 700

12. Ground Elevation: 4495 13. County: MORGAN

14. GPS Data:

Date of Measurement: 08/16/2010 PDOP Reading: 0.0 Instrument Operator's Name: NONE

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: 379 ft

18. Distance to nearest property line: 379 ft 19. Distance to nearest well permitted/completed in the same formation: 1320 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.)
D SAND	DSND	26		

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):
SECTION 6, LOT6S 1,2, S/2NE (NE/4), N/2SE/4 T1N-R67W

25. Distance to Nearest Mineral Lease Line: 379 ft 26. Total Acres in Lease: 240

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: NO MUD WILL BE USED.

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		8+5/8	24	112	75	112	0
1ST		5+1/2	15.5	5,645	225	5,645	

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

33. Comments FINAL AS-DRILLED GPS UNAVAILABLE AT THIS TIME

34. Location ID: 313749

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: MIKE COLLOM

Title: ENGINEERING Date: 7/22/2010 Email: MCOLLOM@KLABZUBA.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: 8/16/2010

API NUMBER
05 087 05441 00

Permit Number: _____ Expiration Date: 8/15/2012

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.

none

Attachment Check List

Att Doc Num	Name	Doc Description
2583223	SURFACE AGRMT/SURETY	LF@2511899 2583223
2583224	APD ORIGINAL	LF@2511898 2583224

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Agency	Null	7/26/2010 4:07:47 PM

Total: 1 comment(s)

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