

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:

400085964

Plugging Bond Surety

20080134

3. Name of Operator: PINE RIDGE OIL & GAS LLC4. COGCC Operator Number: 102765. Address: 600 17TH ST STE 800SCity: DENVER State: CO Zip: 802026. Contact Name: MOE FELMAN Phone: (303)585-1309 Fax: (303)226-1301Email: moe.felman@cometridgeresources.com7. Well Name: CROAKER Well Number: 11-10

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

9. Proposed Total Measured Depth: 3350

WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 10 Twp: 20S Rng: 69W Meridian: 6Latitude: 38.329786 Longitude: -105.102423Footage at Surface: 197 FNL/FSL 935 FEL/FWL FWL11. Field Name: FLORENCE-CANON CITY Field Number: 2460012. Ground Elevation: 5553 13. County: FREMONT

14. GPS Data:

Date of Measurement: 08/10/2010 PDOP Reading: 3.8 Instrument Operator's Name: CHRIS PEARSON15. If well is ☒ Directional ☐ Horizontal (highly deviated) **submit deviated drilling plan.**Footage at Top of Prod Zone: FNL/FSL 87 FSL 56 FWL FWL Bottom Hole: FNL/FSL 87 FSL 56 FWL FWL
Sec: 3 Twp: 20 Rng: 69 Sec: 3 Twp: 20 Rng: 6916. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 900 ft18. Distance to nearest property line: 940 ft 19. Distance to nearest well permitted/completed in the same formation: 540 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.)
PIERRE	PRRE			

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#: 20080135

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):
Township 19 South, Range 69 West, 6th P.M., Section 10: NW/4, S/2SW/4, SE/4

25. Distance to Nearest Mineral Lease Line: 1700 ft 26. Total Acres in Lease: 2584

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: Evaporation and burial

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	24	16	1/4" WT	50	60	50	0
SURF	12+1/4	8+5/8	24	585	200	585	0
1ST	7+7/8	5+1/2	15.5	3,350			

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

33. Comments _____

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: Moe Felman

Title: Sr. Operations Engineer Date: _____ Email: moe.felman@cometridgeresour

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: _____ Director of COGCC Date: _____

API NUMBER

05

Permit Number: _____ Expiration Date: _____

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.

Attachment Check List

Att Doc Num	Name	Doc Description
400088597	PLAT	CROAKER 11-10 20S69W10 Well Cert.pdf
400088599	DEVIATED DRILLING PLAN	Croaker 11-10_DirPlan_Ver1B.pdf
400088600	TOPO MAP	Croaker 11-10 Topographic Map.pdf
400088601	LEASE MAP	Croaker 11-10 Lease Map.pdf
400088602	LEGAL/LEASE DESCRIPTION	Croaker 11-10 Lease Legal Desc.pdf

Total Attach: 5 Files