

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:

400090996

Plugging Bond Surety

19930038

3. Name of Operator: DAVIS, LLC* EDWARD MIKE 4. COGCC Operator Number: 227555. Address: 730 17TH ST STE 450City: DENVER State: CO Zip: 802026. Contact Name: Rhonda White Phone: (970)867-4736 Fax: (970)867-3714Email: rwhite@qwestoffice.net7. Well Name: King-State Well Number: 32-36

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

9. Proposed Total Measured Depth: 4000

WELL LOCATION INFORMATION

10. QtrQtr: SWNE Sec: 36 Twp: 3S Rng: 50W Meridian: 6Latitude: 39.750150 Longitude: -102.921070Footage at Surface: 2429 FNL/FSL FNL 1415 FEL/FWL FEL11. Field Name: Wildcat Field Number: 9999912. Ground Elevation: 4496 13. County: WASHINGTON

14. GPS Data:

Date of Measurement: 08/28/2010 PDOP Reading: 2.5 Instrument Operator's Name: Neal McCormick15. 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 No17. Distance to the nearest building, public road, above ground utility or railroad: 2429 ft18. Distance to nearest property line: 2429 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.)
D & J Sands	DJSND			

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):
See maps, no wells within a mile of location.

25. Distance to Nearest Mineral Lease Line: 1415 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: Evaporation dried in place

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	450	250	450	0
1ST	7+7/8	4+1/2	11.6	4,000	200	4,000	3,150

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: Rhonda White

Title: Administrator Date: 9/8/2010 Email: rwhite@qwestoffice.net

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	Permit Number: _____	Expiration Date: _____
05	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
400090996	FORM 2 SUBMITTED	400090996.pdf
400091002		Waiver Letter King State #32-36.pdf
400091978		Plat for King-State #32-36.pdf

Total Attach: 3 Files

BMP

<u>Type</u>	<u>Comment</u>
Drilling/Completion Operations	Water well receipt 9057492 Permit No. 46395 located approximately 2090' was used to determining water level. No railroad within a mile of location. No surface water within a mile of location. No producing well within a mile of location.

Total: 1 comment(s)