

**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



DE	ET	OE	ES
----	----	----	----

Document Number:  
400099947  
Plugging Bond Surety  
20100082

**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

3. Name of Operator: SLAWSON EXPLORATION COMPANY INC 4. COGCC Operator Number: 10334  
 5. Address: 1675 BROADWAY - SUITE 1600  
 City: DENVER State: CO Zip: 80202  
 6. Contact Name: Venessa Langmacher Phone: (303)857-9999 Fax: (303)450-9200  
 Email: vllpermitco@aol.com  
 7. Well Name: Hermit Well Number: 8-11-66  
 8. Unit Name (if appl): \_\_\_\_\_ Unit Number: \_\_\_\_\_  
 9. Proposed Total Measured Depth: 12780

**WELL LOCATION INFORMATION**

10. QtrQtr: NWSW Sec: 8 Twp: 11N Rng: 66W Meridian: 6  
 Latitude: 40.933970 Longitude: -104.808260  
 Footage at Surface: \_\_\_\_\_ FNL/FSL \_\_\_\_\_ FEL/FWL \_\_\_\_\_  
2032 FSL 605 FWL  
 11. Field Name: Wildcat Field Number: 99999  
 12. Ground Elevation: 5764.3 13. County: WELD

14. GPS Data:  
Date of Measurement: 05/05/2010 PDOP Reading: 1.9 Instrument Operator's Name: Randi Betz

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 \_\_\_\_\_  
1879 FSL 1056 FWL 650 FSL 650 FEL  
 Sec: 8 Twp: 11N Rng: 66W Sec: 8 Twp: 11N Rng: 66W

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: 547 ft  
 18. Distance to nearest property line: 604 ft 19. Distance to nearest well permitted/completed in the same formation: 5280 ft

**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.)
Niobrara	NBRR			

21. Mineral Ownership:  Fee  State  Federal  Indian Lease #: 8734.5

22. Surface Ownership:  Fee  State  Federal  Indian

23. Is the Surface Owner also the Mineral Owner?  Yes  No Surface Surety ID#: 20100120

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):  
T11N-R66W: Section 8: S/2, NE/4

25. Distance to Nearest Mineral Lease Line: 604 ft 26. Total Acres in Lease: 480

### 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
SURF	13+1/2	9+5/8	36	2,118	657	2,118	0
1ST	8+3/4	7+0/0	29	8,980	180	8,980	0
1ST LINER	6+0/0	4+1/2	11.6	12,780			

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

33. Comments No conductor casing will be set. The distance to the nearest well completed in the same formation is greater than one mile from this location.

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: Venessa Langmacher

Title: Regulatory Supervisor Date: \_\_\_\_\_ Email: vllpermitco@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: \_\_\_\_\_ Director of COGCC Date: \_\_\_\_\_

Permit Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

<b>API NUMBER</b>
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
400100026	DEVIATED DRILLING PLAN	Hermit8-11-66pre-spudfiles.pdf
400100027	DEVIATED DRILLING PLAN	Hermit8-11-66SingleLateralPlan.pdf
400100028	DEVIATED DRILLING PLAN	Hermit8-11-66WBD.pdf
400100029	WELL LOCATION PLAT	HERMIT_8-11-66_Well-Location-Map.pdf

Total Attach: 4 Files