

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
----	----	----	----

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:

400127483

Plugging Bond Surety

20090029

3. Name of Operator: HRM RESOURCES LLC 4. COGCC Operator Number: 10273

5. Address: 555 17TH STREET #950
 City: DENVER State: CO Zip: 80202

6. Contact Name: Terry Hoffman Phone: (303)250-0619 Fax: (303)412-8212
 Email: tlhoffman@q.com

7. Well Name: Fritzler Well Number: 8-8-17

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

9. Proposed Total Measured Depth: 7414

WELL LOCATION INFORMATION

10. QtrQtr: SE SE Sec: 17 Twp: 6N Rng: 66W Meridian: 6

Latitude: 40.482690 Longitude: -104.794620

Footage at Surface: _____ feet FNL/FSL _____ feet FEL/FWL _____ feet FEL

11. Field Name: Bracewell Field Number: 7487

12. Ground Elevation: 4770 13. County: WELD

14. GPS Data:

Date of Measurement: 11/23/2010 PDOP Reading: 2.1 Instrument Operator's Name: Brian Brinkman

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 _____
50 FSL 50 FEL 50 FSL 50 FEL
 Sec: 17 Twp: 6N Rng: 66W Sec: 17 Twp: 6N 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: 620 ft

18. Distance to nearest property line: 50 ft 19. Distance to nearest well permitted/completed in the same formation: 15 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.)
NIOBRARA-CODELL	NB-CD	381-5	160	NW

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#: 20080120

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):
 A parcel of land in Section 17-T6N-R66W in the SE/4 lying South of the Cache La Poudre Irrigation Company #2 Ditch (65 acres); & Section 21-T6N-R66W: W/2 NW/4 (80 acres).

25. Distance to Nearest Mineral Lease Line: 50 ft 26. Total Acres in Lease: 145

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 28 or 29 are yes, is this location in a sensitive area (Rule 901.e)? Yes No

31. Mud disposal: Offsite Onsite **If 28, 29, or 30 are "Yes" a pit permit may be required.**

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	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
SURF	12+1/4	8+5/8	26		650	466	650	0
1ST	7+7/8	4+1/2	11.6		7,331	1,072	7,331	

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

33. Comments Conductor will not be set on this well. All footages 5280' are 1 mile or greater. Proposed spacing unit of 160 acres is in Section 17-T6N-R66W: SESE; Section 16-T6N-R66W: SWSW; Section 20-T6N-R66W: NENE; & Section 21-T6N-R66W: NWNW.

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: Terry L. Hoffman

Title: Permit Agent Date: _____ Email: tlhoffman@q.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: _____

API NUMBER
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
1633228	APD ORIGINAL
1633229	WELL LOCATION PLAT
1633230	DEVIATED DRILLING PLAN

Total Attach: 3 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)

BMP

<u>Type</u>	<u>Comment</u>

Total: 0 comment(s)