

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:  
400136782  
Plugging Bond Surety  
20080035

3. Name of Operator: SINGLETREE RESOURCES INC 4. COGCC Operator Number: 10245

5. Address: 25528 GENESEE TRAIL RD  
City: GOLDEN State: CO Zip: 80401

6. Contact Name: Tony Markve Phone: (303)462-3604 Fax: (303)462-3739  
Email: tony@doubtbs.com

7. Well Name: Max Well Number: 14-24

8. Unit Name (if appl): \_\_\_\_\_ Unit Number: \_\_\_\_\_

9. Proposed Total Measured Depth: 5300

WELL LOCATION INFORMATION

10. QtrQtr: SWSW Sec: 24 Twp: 11N Rng: 54W Meridian: 6

Latitude: 40.907950 Longitude: -103.360250

Footage at Surface: 666 feet FNL/FSL FSL 658 feet FEL/FWL FWL

11. Field Name: Wildcat Field Number: 99999

12. Ground Elevation: 4281 13. County: LOGAN

14. GPS Data:

Date of Measurement: 02/23/2011 PDOP Reading: 2.1 Instrument Operator's Name: C. Vanmatre

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: 660 ft

18. Distance to nearest property line: 4622 ft 19. Distance to nearest well permitted/completed in the same formation: 1 mi

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.)

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 attached sheet

25. Distance to Nearest Mineral Lease Line: 4622 ft 26. Total Acres in Lease: 11120

### 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
#Error			#Error					

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

33. Comments Conductor casing will not be used

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: Tony Markve

Title: Engineer Date: 3/8/2011 Email: tony@doubtbs.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: \_\_\_\_\_

<b>API NUMBER</b>	Permit Number: _____	Expiration Date: _____
05	<b>CONDITIONS OF APPROVAL, IF ANY:</b>	

**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	Document Name	attached ?	
<b>Attachment Checklist</b>			
	317B Notification	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400011045	Access Road Map	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	CDP Conditions	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Const Layout Drawings	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400013433	Hydrology Map	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400011037	Location Drawing	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400011038	Location Pictures	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Multi-well Plan	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	NRCS Map Unit Desc	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
400011031	Proposed BMPs	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Reference Area Map	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Reference Area Pictures	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Section 404 Permit	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Sensitive Area Data	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Sensitive Area Map	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<b>Other Attachments</b>			
400011042	SURFACE AGRMT/SURETY	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
400013446	FORM 2A SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

#### 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)