

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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Document Number:

400165929

Plugging Bond Surety

20060105

APPLICATION FOR PERMIT TO:

1. ☒ Drill, ☐ Deepen, ☐ Re-enter, ☐ Recomplete and Operate

2. TYPE OF WELL

OIL ☒ GAS ☐ COALBED ☐ OTHER ☐ AND GAS ☐SINGLE ZONE ☐ MULTIPLE ☒ COMMINGLE ☒Refiling ☐Sidetrack ☐3. Name of Operator: APOLLO OPERATING LLC4. COGCC Operator Number: 100515. Address: 1538 WAZEE ST STE 200City: DENVER State: CO Zip: 802026. Contact Name: TANYA CARPIO Phone: (303)830-0888 Fax: (303)830-2818Email: TCARPIO@APOLLOOPERATING.COM7. Well Name: E.L. MINCH Well Number: 14-4D

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

9. Proposed Total Measured Depth: 7755

WELL LOCATION INFORMATION

10. QtrQtr: SESW Sec: 4 Twp: 3N Rng: 68W Meridian: 6Latitude: 40.250890 Longitude: -105.012880

Footage at Surface:	<u>1180</u>	feet	FNL/FSL	<u>1344</u>	feet	FEL/FWL
			FSL			FWL

11. Field Name: WATTENBERG Field Number: 9075012. Ground Elevation: 5061 13. County: WELD

14. GPS Data:

Date of Measurement: 04/21/2011 PDOP Reading: 1.5 Instrument Operator's Name: ADAM KELLY15. 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
<u>664</u>	<u>FSL</u>	<u>664</u>	<u>664</u>	<u>FSL</u>	<u>664</u>
		<u>FWL</u>			<u>FWL</u>
Sec: <u>4</u>	Twp: <u>3N</u>	Rng: <u>68W</u>	Sec: <u>4</u>	Twp: <u>3N</u>	Rng: <u>68W</u>

16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 430 ft18. Distance to nearest property line: 150 ft 19. Distance to nearest well permitted/completed in the same formation: 3070 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	407-87	80	S/2SW/4

21. Mineral Ownership: ☒ Fee ☐ State ☐ Federal ☐ Indian Lease #: _____22. Surface Ownership: ☒ Fee ☐ State ☐ Federal ☐ Indian23. 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 ☐ No23b. If 23 is ☐ Surface Owners Agreement Attached or ☐ \$25,000 Blanket Surface Bond ☐ \$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 sample lease map if appropriate) AND MINERAL LEASE MAP.

25. Distance to Nearest Mineral Lease Line: 150 ft

26. Total Acres in Lease: 167

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: CLOSED LOOP SYSTEM

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	24	0	400	275	400	
1ST	7+7/8	4+1/2	11.6	0	7,755	525	7,755	3,000

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

33. Comments NO CONDUCTOR WILL 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: TANYA CARPIO

Title: OFFICE MANAGER

Date: 5/18/2011

Email: TCARPIO@APOLLOOPERATI

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
400165929	FORM 2 SUBMITTED
400165938	LEGAL/LEASE DESCRIPTION
400165940	MINERAL LEASE MAP
400165973	WELL LOCATION PLAT
400165977	DEVIATED DRILLING PLAN
400167423	30 DAY NOTICE LETTER
400167438	SURFACE AGRMT/SURETY

Total Attach: 7 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)