


<b>FORM</b> <b>2</b> Rev 12/05	<b>State of Colorado</b> <b>Oil and Gas Conservation Commission</b> 1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">DE</td> <td style="width: 25%;">ET</td> <td style="width: 25%;">OE</td> <td style="width: 25%;">ES</td> </tr> </table>	DE	ET	OE	ES
DE	ET	OE	ES				
<b>APPLICATION FOR PERMIT TO:</b>			Document Number:  400134741  Plugging Bond Surety  20050105				
1. <input checked="" type="checkbox"/> <b>Drill,</b> <input type="checkbox"/> Deepen, <input type="checkbox"/> Re-enter, <input type="checkbox"/> Recomplete and Operate							
2. TYPE OF WELL OIL <input checked="" type="checkbox"/> GAS <input type="checkbox"/> COALBED <input type="checkbox"/> OTHER _____ SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input checked="" type="checkbox"/> COMMINGLE ZONE <input checked="" type="checkbox"/>		Refiling <input checked="" type="checkbox"/> Sidetrack <input type="checkbox"/>					
3. Name of Operator: <u>ST. JAMES ENERGY OPERATING INC</u>		4. COGCC Operator Number: <u>10131</u>					
5. Address: <u>11177 EAGLE VIEW DR STE 1</u> City: <u>SANDY</u> State: <u>UT</u> Zip: <u>84092</u>							
6. Contact Name: <u>Kent Moore</u> Phone: <u>(970)301-0291</u> Fax: <u>(970)378-8623</u> Email: <u>nick.callaway@lra-inc.com</u>							
7. Well Name: <u>LARSEN FAIRMEADOWS</u>		Well Number: <u>5-30</u>					
8. Unit Name (if appl): _____		Unit Number: _____					
9. Proposed Total Measured Depth: <u>7300</u>							
<b>WELL LOCATION INFORMATION</b>							
10. QtrQtr: <u>SESW</u> Sec: <u>30</u> Twp: <u>6N</u> Rng: <u>63W</u> Meridian: <u>6</u> Latitude: <u>40.452010</u> Longitude: <u>-104.481900</u>							
Footage at Surface: <u>649</u> feet    FNL/FSL <u>1909</u> feet    FEL/FWL <u>FWL</u>							
11. Field Name: <u>WATTENBERG</u>		Field Number: <u>90750</u>					
12. Ground Elevation: <u>4640</u>		13. County: <u>WELD</u>					
14. GPS Data: Date of Measurement: <u>10/17/2008</u> PDOP Reading: <u>1.7</u> Instrument Operator's Name: <u>E. HERNANDEZ</u>							
15. If well is <input type="checkbox"/> Directional <input type="checkbox"/> Horizontal (highly deviated) <b>submit deviated drilling plan.</b> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
17. Distance to the nearest building, public road, above ground utility or railroad: <u>649 ft</u>							
18. Distance to nearest property line: <u>649 ft</u> 19. Distance to nearest well permitted/completed in the same formation: <u>1239 ft</u>							
<b>20. LEASE, SPACING AND POOLING INFORMATION</b>							
Objective Formation(s)	Formation Code	Spacing Order Number(s)	Unit Acreage Assigned to Well	Unit Configuration (N/2, SE/4, etc.)			
Codell	codl	407-87	80	E/2SW4			
Niobrara	nbrr	407-87	80	E/2SW4			

**IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.**

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#: 20070026

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 lease

25. Distance to Nearest Mineral Lease Line: 649 26. Total Acres in Lease: 240

**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

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	24	0	750	440	750	0
1ST	7+7/8	4+1/2	11.6	0	7,300	760	7,300	0

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

33. Comments No Conductor casing will be set

34. Location ID: 302733

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: Dan Hull

Title: Project Manager Date: 4/19/2011 Email: dan.hull@lra-inc.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: David S. Neslin Director of COGCC Date: 6/3/2011

**API NUMBER**

05 123 29708 00

Permit Number: \_\_\_\_\_ Expiration Date: 6/2/2013

**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.**

- 1) Provide 24 hour notice of MIRU to Bo Brown at Bo Brown at 970-397-4124 or e-mail at bo.brown@state.co.us
- 2) Comply with Rule 317.i and provide cement coverage from TD to a minimum of 200' above Niobrara. Verify coverage with cement bond log.

**Attachment Check List**

Att Doc Num	Name
2112795	SURFACE CASING CHECK
400134741	FORM 2 SUBMITTED
400151840	WELL LOCATION PLAT
400156080	LEGAL/LEASE DESCRIPTION

Total Attach: 4 Files

**General Comments**

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	No bmp added to tab Back to draft	4/22/2011 9:58:35 AM
Permit	Back to draft for BMP's to be added to tab, no location ID, and no answer to 22B, and formation code invalid. sf	4/20/2011 3:09:14 PM

Total: 2 comment(s)

**BMP**

<u>Type</u>	<u>Comment</u>
Drilling/Completion Operations	All casing will be cemented to surface.

Total: 1 comment(s)