

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:

400193471

Plugging Bond Surety

APPLICATION FOR PERMIT TO:

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

2. TYPE OF WELL

- OIL GAS COALBED OTHER _____
 SINGLE ZONE MULTIPLE COMMINGLE

- Refiling
 Sidetrack

3. Name of Operator: GENESIS GAS & OIL LLC 4. COGCC Operator Number: 10132

5. Address: 1701 WALNUT STREET - 4TH FL
 City: KANSAS CITY State: MO Zip: 64108

6. Contact Name: Robert Behner Phone: (816)222-7500 Fax: (816)222-7501
 Email: bbehner@genesisco.com

7. Well Name: Fletcher Gulch Well Number: 9-14

8. Unit Name (if appl): Fletcher Gulch Unit Number: COC68958X

9. Proposed Total Measured Depth: 2210

WELL LOCATION INFORMATION

10. QtrQtr: Lot 1 Sec: 9 Twp: 1N Rng: 100W Meridian: 6
 Latitude: 40.076790 Longitude: -108.613520

Footage at Surface: 275 feet FNL/FSL FNL 202 feet FEL/FWL FEL

11. Field Name: wildcat Field Number: 99999

12. Ground Elevation: 6197 13. County: RIO BLANCO

14. GPS Data:

Date of Measurement: 09/08/2008 PDOP Reading: 2.4 Instrument Operator's Name: Chris Hamilton

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: 2616 ft

18. Distance to nearest property line: 221 ft 19. Distance to nearest well permitted/completed in the same formation: 1704 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.)
Williams Fork Coals	WMFKC			

21. Mineral Ownership: Fee State Federal Indian Lease #: COC63322

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 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 separate sheet/map if you prefer):

Please see attached Lease description

25. Distance to Nearest Mineral Lease Line: 216 ft 26. Total Acres in Lease: 2205

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	24#	0	500	200	500	0
2ND	7+7/8	5+1/2	15.5#	0	2,210	230	2,210	0

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

33. Comments There are no improvements within 400' of subject location's area of disturbance, other than access and Lease roads.

34. Location ID: 413497

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: Sheryl M. Little-Myers

Title: Agent Date: 8/17/2011 Email: Sheryl@MyersEnergyServices.

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

05 103 11571 00

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
400193471	FORM 2 SUBMITTED
400193473	LEGAL/LEASE DESCRIPTION
400193474	LOCATION DRAWING
400193475	PLAT
400193476	HYDROLOGY MAP
400193481	LOCATION PICTURES
400197684	ACCESS ROAD MAP
400197687	ACCESS ROAD MAP

Total Attach: 8 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>
Final Reclamation	Equipment will be removed. Wattles will be removed. Pad surface will be recontoured with the goal being to return the location to pre-disturbance contours. Soils will be redistributed, seeded with BLM prescribed seed mixture, and mulched.
Drilling/Completion Operations	Wattles will be installed (post-construction) at the toe of soils piles. Cut and fill slopes will be observed to assure non-movement of soils.
Construction	To avoid erosion, surface will not be re-contoured if soils are too moist. Fill and cut areas will be sloped to a degree conducive to inhibiting soil movement.
Interim Reclamation	Soils and topsoil will be spread over designated areas of the pad, seeded and mulched.
Storm Water/Erosion Control	Inspections will be performed at prescribed intervals, and after storm events. Maintenance and/or mitigation measures will be performed as necessary

Total: 5 comment(s)