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Document Number:  
 400189926  
 PluggingBond SuretyID  
 20070004

**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: BONANZA CREEK ENERGY OPERATING COMPANY LLC 4. COGCC Operator Number: 8960  
 5. Address: P O BOX 21974  
 City: BAKERSFIELD State: CA Zip: 93390  
 6. Contact Name: Keith Caplan Phone: (720)440-6112 Fax: (720)279-2331  
 Email: KCaplan@bonanzacr.com  
 7. Well Name: State Whitetail Well Number: 14-11-36HZ  
 8. Unit Name (if appl): \_\_\_\_\_ Unit Number: \_\_\_\_\_  
 9. Proposed Total Measured Depth: 9931

**WELL LOCATION INFORMATION**

10. QtrQtr: SWSW Sec: 36 Twp: 6N Rng: 62W Meridian: 6  
 Latitude: 40.439170 Longitude: -104.279110  
 Footage at Surface: 682 feet FNL/FSL 505 feet FEL/FWL FWL  
 11. Field Name: Wattenberg Field Number: 90750  
 12. Ground Elevation: 4680 13. County: WELD

14. GPS Data:  
 Date of Measurement: 08/16/2011 PDOP Reading: 1.9 Instrument Operator's Name: Dan Griggs

15. If well is  Directional  Horizontal (highly deviated) **submit deviated drilling plan.**  
 Footage at Top of Prod Zone: FNL/FSL 1237 FSL 505 FWL \_\_\_\_\_ Bottom Hole: FNL/FSL 460 FNL 532 FWL \_\_\_\_\_  
 Sec: 36 Twp: 6N Rng: 62W Sec: 36 Twp: 6N Rng: 62W

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: 820 ft  
 18. Distance to nearest property line: 505 ft 19. Distance to nearest well permitted/completed in the same formation: 2400 ft

**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	NBRR		160	W/2W/2

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 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):

Sec: 36 T6N R62W ALL

25. Distance to Nearest Mineral Lease Line: 505 ft 26. Total Acres in Lease: 640

### 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	9+5/8	36	0	441	280	441	0
1ST	8+3/4	7+0/0	26	0	6,672	861	6,672	0
1ST LINER	6+1/8	4+1/2	11.6	0	10,700			

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

33. Comments Conductor casing will not be used on this well.

34. Location ID: 420115

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: Keith Caplan

Title: Sr. Operations Tech Date: 8/18/2011 Email: KCaplan@bonanzacrk.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: 9/11/2011

<b>API NUMBER</b>
05 123 32457 00

Permit Number: \_\_\_\_\_ Expiration Date: 9/10/2013

**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 Jim Precup at 303-469-1902 or e-mail at james.precup@state.co.us .
- 2) Provide cement coverage from base of intermediate casing to a minimum of 200' above Niobrara. Verify coverage with cement bond log.
- 3) Run and submit Directional Survey from TD to base of surface casing. Ensure that the wellbore complies with setback requirements in commission orders or rules prior to producing the well.

**Attachment Check List**

Att Doc Num	Name
2530958	DEVIATED DRILLING PLAN
400189926	FORM 2 SUBMITTED
400197680	PLAT

Total Attach: 3 Files

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Permit	DirectionalPLan (new) made changes to permit.	8/22/2011 11:31:23 AM
Permit	Corrected QtrQtr at operators request.	8/19/2011 8:06:28 AM
Permit	Returned to draft. Provided lat long does not match QtrQtr.	8/19/2011 6:36:38 AM

Total: 3 comment(s)

**BMP**

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

Total: 0 comment(s)