

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



Table with columns DE, ET, OE, ES

APPLICATION FOR PERMIT TO:

1. Drill, Deepen, Re-enter, [X] Recomplete and Operate

2. TYPE OF WELL

OIL [X] GAS COALBED OTHER SINGLE ZONE MULTIPLE [X] COMMINGLE [X]

Refiling Sidetrack

Document Number: 400246190 PluggingBond SuretyID 20010023

3. Name of Operator: K P KAUFFMAN COMPANY INC 4. COGCC Operator Number: 46290

5. Address: 1675 BROADWAY, STE 2800 City: DENVER State: CO Zip: 80202

6. Contact Name: Susana Lara-Mesa Phone: (303)825-4822 Fax: (303)825-4825 Email: slaramesa@kpk.com

7. Well Name: JORDAN Well Number: 34-4

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

9. Proposed Total Measured Depth: 8040

WELL LOCATION INFORMATION

10. QtrQtr: NESE Sec: 34 Twp: 1N Rng: 65W Meridian: 6 Latitude: 40.005124 Longitude: -104.644247

Footage at Surface: 1650 feet FNL/FSL FSL 990 feet FEL/FWL FEL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 5151 13. County: WELD

14. GPS Data:

Date of Measurement: 01/20/2012 PDOP Reading: 1.5 Instrument Operator's Name: B Teter

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 [X] No

17. Distance to the nearest building, public road, above ground utility or railroad: 405 ft

18. Distance to nearest property line: 185 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 1157 ft

20. LEASE, SPACING AND POOLING INFORMATION

Table with columns: Objective Formation(s), Formation Code, Spacing Order Number(s), Unit Acreage Assigned to Well, Unit Configuration (N/2, SE/4, etc.)

21. Mineral Ownership: [X] Fee [ ] State [ ] Federal [ ] Indian Lease #:

22. Surface Ownership: [X] Fee [ ] State [ ] Federal [ ] Indian

23. Is the Surface Owner also the Mineral Owner? [X] Yes [ ] No Surface Surety ID#:

23a. If 23 is Yes: Is the Surface Owner(s) signature on the lease? [X] 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 34-T1N-R65W

25. Distance to Nearest Mineral Lease Line: 990 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	8+5/8	24	0	219	200	219	0
1ST	7+7/8	4+1/2	11.6	0	8,040	370	8,040	

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

33. Comments FORM 4 HAS BEEN SUBMITTED TO THE COGCC OFFICE ALONG WITH WELLBORE DIAGRAM

34. Location ID: 323205

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: Susana Lara-Mesa

Title: Engineering Project Mgr Date: 2/6/2012 Email: slaramesa@kpk.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: \_\_\_\_\_

**API NUMBER**

05 123 12709 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
400246190	FORM 2 SUBMITTED

Total Attach: 1 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)