

FORM
2

Rev
12/05

State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

400272285

Date Received:

05/01/2012

PluggingBond SuretyID

20100130

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: ELM RIDGE EXPLORATION CO LLC

4. COGCC Operator Number: 26625

5. Address: 12225 GREENVILLE AVE STE 950

City: DALLAS State: TX Zip: 95243

6. Contact Name: Terry Lindeman Phone: (505)632-3476 Fax: (505)632-8151

Email: tlindeman@elmridge.net

7. Well Name: IGE Well Number: 117

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

9. Proposed Total Measured Depth: 3315

WELL LOCATION INFORMATION

10. QtrQtr: SENW Sec: 18 Twp: 33N Rng: 7W Meridian: N

Latitude: 37.107270 Longitude: -107.653750

Footage at Surface: 1512 feet FNL/FSL FNL 1621 feet FEL/FWL FWL

11. Field Name: Ignacio Blanco Field Number: 38300

12. Ground Elevation: 6532 13. County: LA PLATA

14. GPS Data:

Date of Measurement: 01/22/2007 PDOP Reading: 3.0 Instrument Operator's Name: Nelson Ross

15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL 1641 FNL 990 FWL 1700 FNL 700 FWL
Bottom Hole: FNL/FSL _____ FEL/FWL _____
Sec: 18 Twp: 33N Rng: 7W Sec: 18 Twp: 33N Rng: 7W

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: 850 ft

18. Distance to nearest property line: 154 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 1900 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.)
Fruitland Coal	FRLDC	112-195	320	W/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):

SW/4NW/4, Section 18, T33N-R7W

25. Distance to Nearest Mineral Lease Line: 700 ft 26. Total Acres in Lease: 40

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, bury on site

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	250	400	250	
1ST	7+7/8	5+1/2	17#	0	3,310	338	3,310	

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

33. Comments No conductor casing for this well. It will be located on an existing well pad. Very little additional ground disturbance will occur.

34. Location ID: 311899

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: C. Brad Caskey

Title: Agent Date: 5/1/2012 Email: brad@animas.net

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

05 067 09532 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
400272285	FORM 2 SUBMITTED
400272301	DEVIATED DRILLING PLAN
400272311	SURFACE AGRMT/SURETY
400272348	OTHER
400279915	WELL LOCATION PLAT

Total Attach: 5 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)