

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 1621 feet FEL/FWL
FNL 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 1700 FNL 700 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

User Group	Comment	Comment Date

Total: 0 comment(s)

BMP

Type	Comment

Total: 0 comment(s)