

FORM
2

Rev
12/05

State of Colorado Oil and Gas Conservation Commission

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Document Number:

400308794

Date Received:

07/26/2012

PluggingBond SuretyID

20100114

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: GULFPORT ENERGY CORPORATION

4. COGCC Operator Number: 10339

5. Address: 14313 N. MAY AVENUE - SUITE 100

City: OKLAHOMA CITY State: OK Zip: 73134

6. Contact Name: David Segobia Phone: (405)242-4977 Fax: (405)848-8816

Email: dsegobia@gulfportenergy.com

7. Well Name: Ridgeview Well Number: 32-16-1

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

9. Proposed Total Measured Depth: 8970

WELL LOCATION INFORMATION

10. QtrQtr: NESW Sec: 16 Twp: 6N Rng: 91W Meridian: 6

Latitude: 40.482370 Longitude: -107.602260

Footage at Surface: 2402 feet FNL/FSL FSL 2660 feet FEL/FWL FWL

11. Field Name: Craig Field Number: 13500

12. Ground Elevation: 6222 13. County: MOFFAT

14. GPS Data:

Date of Measurement: 05/30/2012 PDOP Reading: 1.5 Instrument Operator's Name: B. Powers

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: 585 ft

18. Distance to nearest property line: 990 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 1128 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.)
Niobra	NBRR			

21. Mineral Ownership: Fee State Federal Indian Lease #: 2076.12

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):

Twp 16 Rng 91 Sec 16

25. Distance to Nearest Mineral Lease Line: 2402 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: Evaporitive pit method

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	880	255	880	
1ST	8+3/4	7+0/0	23	0	6,561	520	6,561	
OPEN HOLE	6+1/8	0+0/0	0	6561	8,970	0	0	

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

33. Comments Rotating head will be utilized if a surface hole drilling rig equipped to drill with air/air mist is used to preset surface casing. See Drilling plan for BOP plan below surface casing to TDIf oil based cuttings are encountered then steps will be taken to segregate them and keep them contained or fenced

34. Location ID: _____

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: Peter Jensen

Title: Agent for Gulfport Date: 7/26/2012 Email: jpj@prymorysenviron.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

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
400308794	FORM 2 SUBMITTED
400308835	LOCATION DRAWING
400308838	WELL LOCATION PLAT

Total Attach: 3 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)