

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:

400327563

Date Received:

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 ☐

PluggingBond SuretyID

20110169

3. Name of Operator: SOVEREIGN OPERATING COMPANY LLC

4. COGCC Operator Number: 10383

5. Address: 621 17TH STREET #950

City: DENVER State: CO Zip: 80293

6. Contact Name: STEPHANIE CLASEN Phone: (303)297-0347 Fax: (303)297-9075

Email: SOVEREIGNENERGY@AOL.COM

7. Well Name: MEMORIAL Well Number: 31-3

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

9. Proposed Total Measured Depth: 8880

WELL LOCATION INFORMATION

10. QtrQtr: SWNE Sec: 3 Twp: 1S Rng: 68W Meridian: 6

Latitude: 39.994310 Longitude: -104.987680

Footage at Surface: 2185 feet FNL/FSL FNL 2648 feet FEL/FWL FEL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 5193 13. County: BROOMFIELD

14. GPS Data:

Date of Measurement: 03/30/2012 PDOP Reading: 2.6 Instrument Operator's Name: MARC WOODARD

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  
557 FNL 2007 FEL 557 FNL 2007 FEL  
Sec: 3 Twp: 1S Rng: 68W Sec: 3 Twp: 1S Rng: 68W

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: 650 ft

18. Distance to nearest property line: 16 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 1757 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.) |
|------------------------|----------------|-------------------------|-------------------------------|--------------------------------------|
| J SAND                 | JSND           | 467-8                   | 160                           | NE/4                                 |
| NIOBRARA-CODELL        | NB-CD          | 467-8                   | 80                            | W/2NE/4                              |

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):

SECTION 3, T1S, R68W: NW & NE, PARTIAL, AS DESCRIBED IN TWO SPECIAL WARRANTY DEEDS RECORDED AT REC. #796809 & 796794 & QUIT CLAIM DEEDS RECORDED AT REC. #796810 & 796795; A 30.0 FOOT STRIP OF LAND ALONG THE WEST SIDE OF THE SW, AS DESCRIBED IN WARRANTY DEEDS IN BOOK 2853 AT PAGE 951 & IN BOOK 2975 AT PAGE 588.

25. Distance to Nearest Mineral Lease Line: 557 ft 26. Total Acres in Lease: 224

### 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             | 1,100         | 550       | 1,100   | 0       |
| 1ST         | 7+7/8        | 4+1/2          | 11.6  | 0             | 8,880         | 525       | 8,880   | 7,675   |

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

33. Comments CONDUCTOR CASING IS NOT APPLICABLE

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: STEPHANIE CLASEN

Title: OFFICE MANAGER Date: \_\_\_\_\_ Email: SOVEREIGNENERGY@AOL.

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                   |
|-------------|------------------------|
| 400327593   | 30 DAY NOTICE LETTER   |
| 400327594   | PLAT                   |
| 400327595   | DEVIATED DRILLING PLAN |
| 400327596   | DIRECTIONAL DATA       |
| 400327597   | SURFACE AGRMT/SURETY   |

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)