

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:

400363235

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

19860025

3. Name of Operator: TOP OPERATING COMPANY

4. COGCC Operator Number: 39560

5. Address: 10881 ASBURY AVE STE 230

City: LAKEWOOD State: CO Zip: 80227

6. Contact Name: Paul Herring Phone: (720)6631698 Fax: (303)7279915

Email: paul.herring@topoperating.com

7. Well Name: Kintz Well Number: 2

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

9. Proposed Total Measured Depth: 8148

WELL LOCATION INFORMATION

10. QtrQtr: SENE Sec: 8 Twp: 3N Rng: 68W Meridian: 6

Latitude: 40.242460 Longitude: -105.020890

Footage at Surface: 1883 feet FNL/FSL FNL 920 feet FEL/FWL FEL

11. Field Name: Wattenberg Field Number: 90750

12. Ground Elevation: 5079 13. County: WELD

14. GPS Data:

Date of Measurement: 09/04/2012 PDOP Reading: 2.3 Instrument Operator's Name: Brian Rottinghaus

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
1996 FSL 1985 FEL 1996 FSL 1985 FEL
Sec: 8 Twp: 3N Rng: 68W Sec: 8 Twp: 3N 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: 298 ft

18. Distance to nearest property line: 531 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 71 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	232-23	320	E/2
Niobrara/Codell	NB-CD	407-87	320	E/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):

Section 8: S/2 NE/4, 37.4 ACRES OUT OF THE SE/4NW/4; Section 9:23 acres out of the SW/4NW/4. SE/4 less 21.74 acres Separate map attached.

25. Distance to Nearest Mineral Lease Line: 484 ft 26. Total Acres in Lease: 278

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	400	250	400	
S.C. 1.1	7+7/8	4+1/2	11.6#	0	8,450	375	8,450	6,500

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

33. Comments CLOSED LOOP SYSTEM NO CONDUCTOR PIPE WILL BE SET. Well is part of a Proposed Spacing Unit that contains E/2 of Sec. 8.

34. Location ID: 319065

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: Paul Herring

Title: Landman Date: _____ Email: paul.herring@topoperating.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.

Date retrieval failed for the subreport 'IntPolicy_MTC' located at: W:\testpub\Net\Report\policy_mtc.rdl. Please check th

Attachment Check List

Att Doc Num	Name
400363275	DIRECTIONAL DATA
400363276	PLAT
400363284	DEVIATED DRILLING PLAN
400363286	TOPO MAP
400363287	SURFACE AGRMT/SURETY
400364276	LEASE MAP
400364542	LOCATION DRAWING
400364545	LOCATION PICTURES
400364553	30 DAY NOTICE LETTER
400364556	LGD CONSULTATION

Total Attach: 10 Files

General Comments

User Group	Comment	Comment Date
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Total: 0 comment(s)

BMP

Type	Comment
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Total: 0 comment(s)