

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:

400364071

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

20090217

3. Name of Operator: ENTEK GRB LLC

4. COGCC Operator Number: 10323

5. Address: 535 16TH STREET #620

City: DENVER State: CO Zip: 80202

6. Contact Name: Kimberly Rodell Phone: (303)820-4480 Fax: (303)820-4124

Email: kim@banko1.com

7. Well Name: FRU Federal Well Number: 4-14

8. Unit Name (if appl): Focus Ranch Unit Number: COC63212X

9. Proposed Total Measured Depth: 9150

WELL LOCATION INFORMATION

10. QtrQtr: SESW Sec: 4 Twp: 11N Rng: 88W Meridian: 6

Latitude: 40.937136 Longitude: -107.271669

Footage at Surface: 614 feet FSL 1735 feet FWL

11. Field Name: Wildcat Field Number: 99999

12. Ground Elevation: 7982 13. County: ROUTT

14. GPS Data:

Date of Measurement: 07/09/2012 PDOP Reading: 1.9 Instrument Operator's Name: Dave Fehringer

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: 100 ft

18. Distance to nearest property line: 614 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 5764 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.)
Deep Creek	DPCK			
Frontier	FRTR			
Niobrara	NBRR			

21. Mineral Ownership: Fee State Federal Indian Lease #: COC59491

22. Surface Ownership: Fee State Federal Indian

23. Is the Surface Owner also the Mineral Owner? Yes No Surface Surety ID#: 20090128

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):
 T11N R88W Sec. 3: S2N2, SW, SWSE, Lots 5-8; Sec. 4: S2N2, S2, Lots: 5-8; Sec. 10: NE, S2; Sec. 15: SE

25. Distance to Nearest Mineral Lease Line: 614 ft 26. Total Acres in Lease: 1806

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: Buried onsite

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
CONDUCTOR	20	16		0	60		60	0
SURF	12+1/4	9+5/8	36	0	2,500	568	2,500	0
1ST	8+3/4	7	23	0	9,150	820	9,150	1,200

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

33. Comments A closed loop system will be utilized. The cuttings will be dried and buried onsite in an approved pit. The closest public road to the location is an existing two track.

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: Kimberly Rodell

Title: Permit Agent Date: _____ Email: kim@banko1.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.

Data retrieval failed for the subreport 'IntPolicy_NTC' located at: W:\ncatpub\Net\Reports\policy_ntc.rdl. Please check th

Attachment Check List

Att Doc Num	Name
400369454	PLAT
400369455	DRILLING PLAN
400369456	TOPO MAP

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)