

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:

400363234

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: Haley Well Number: 3

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

9. Proposed Total Measured Depth: 7889

WELL LOCATION INFORMATION

10. QtrQtr: NWSW Sec: 20 Twp: 3N Rng: 68W Meridian: 6

Latitude: 40.209220 Longitude: -105.033840

Footage at Surface: 1957 feet FNL/FSL FSL 703 feet FEL/FWL FWL

11. Field Name: Wattenberg Field Number: 90750

12. Ground Elevation: 5078 13. County: WELD

14. GPS Data:

Date of Measurement: 09/05/2012 PDOP Reading: 1.9 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
 1326 FSL 1330 FWL 1326 FSL 1330 FWL
 Sec: 20 Twp: 3N Rng: 68W Sec: 20 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: 608 ft

18. Distance to nearest property line: 657 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 909 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		320	W/2
Niobrara/Codell	NB-CD		160	SW/4

21. Mineral Ownership: ☒ Fee ☐ State ☐ Federal ☐ Indian Lease #: _____22. Surface Ownership: ☒ Fee ☐ State ☐ Federal ☐ Indian23. 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):

S/2, Section 20, Township 3N Range 68W.

25. Distance to Nearest Mineral Lease Line: 1850 ft

26. Total Acres in Lease: 320

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	0
S.C. 1.1	7+7/8	4+1/2	11.6	0	7,800	375	7,800	6,500

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

33. Comments CLOSED LOOP SYSTEM NO CONDUCTOR PIPE WILL BE SET. The closest permitted well is the Haley 2 which is producing. The measurement is from the BHL of both wells. Surface Owners Agreement is part of the lease (see attachments).

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.

Data retrieval failed for the subreport 'IntPolicy_NTO' located at: W:\Instrub\Nat\Reports\policy_nto.rdl. Please check th

Attachment Check List

Att Doc Num	Name
400377075	DIRECTIONAL DATA
400377076	WELL LOCATION PLAT
400377077	DEVIATED DRILLING PLAN
400377078	TOPO MAP
400377119	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)