

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:

400385777

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

20050105

3. Name of Operator: ST. JAMES ENERGY OPERATING INC 4. COGCC Operator Number: 10131

5. Address: 11177 EAGLE VIEW DR STE 1
City: SANDY State: UT Zip: 84092

6. Contact Name: Kent Moore Phone: (970)301-0291 Fax: (970)378-8623
Email: krmtaurus@msn.com

7. Well Name: Albrighton Well Number: 2-10

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

9. Proposed Total Measured Depth: 7137

WELL LOCATION INFORMATION

10. QtrQtr: SWSW Sec: 10 Twp: 6N Rng: 64W Meridian: 6

Latitude: 40.496610 Longitude: -104.541070

Footage at Surface: 1170 feet FNL/FSL FSL 1296 feet FEL/FWL FWL

11. Field Name: Harlech Field Number: 33560

12. Ground Elevation: 4807 13. County: WELD

14. GPS Data:

Date of Measurement: 03/01/2013 PDOP Reading: 1.9 Instrument Operator's Name: Thad Cook

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: 932 ft

18. Distance to nearest property line: 152 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 668 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.)
Niobrara-Codell	NB-CD	407-87	160	SW/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):

Southwest Quarter of Section 10, Township 6 North, Range 64 West of the 6th P.M.

25. Distance to Nearest Mineral Lease Line: 1170 ft 26. Total Acres in Lease: 160

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	750	300	750	0
1ST	7+7/8	4+1/2	11.6	0	7,137	714	7,137	0

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

33. Comments 1. In addition to Kent Moore and Dan Hull, please contact Erin Mathews at Erin.Mathews@LRA-inc.com with any questions. 2. No conductor casing will be set. 3. St. James Energy requests an exception to Rule 318A.c.: wellhead will be located over 50' from an existing well. Waiver and Exception location request attached.

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: Daniel Hull

Title: Senior Project Manager Date: _____ Email: dan.hull@LRA-inc.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:\Inetpub\NetReports\policy_ntc.rdl. Please check th

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400394962	WELL LOCATION PLAT
400394963	EXCEPTION LOC WAIVERS
400394964	OIL & GAS LEASE
400394965	SURFACE AGRMT/SURETY
400394966	EXCEPTION LOC REQUEST

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>
Drilling/Completion Operations	A closed loop system will be utilized during drilling.

Total: 1 comment(s)