



99999999

ervation Commission
NATURAL RESOURCES

1210567



-OR PERMIT TO:

☒ Drill, ☐ Deepen, ☐ Re-enter, ☐ Recomplete and Operate1 b. TYPE OF WELL
OIL ☒ GAS ☐ COAL BED ☐ OTHER: ☐
SINGLE ZONE ☐ MULTIPLE ZONE ☐ COMMINGLE ZONES ☐Refilling ☐
SideTrack ☐ET ☐ DE ☐ PR ☐ ES ☐

| | |
|---|-----------------------------------|
| 2. OGCC Operator Number: 94300 | 5. Contact Name & Phone: 308-7000 |
| 3. Name of Operator: Ahmed Ward and Son | No. 214-5350 |
| 4. Address: Box 737 | City: Ogalla, NE Zip: 69153 |
| 6. Well Name: Durali | Well Number: 1 |
| 7. Unit Name (if Appl.): | Unit No: |
| 8. Objective/Formation(s): J Sand | Formation Code: J SMD |
| 9. Proposed Total Depth: 5250 | |

Complete the
Attachment Checklist

| | |
|---------------------------------|-------------------------------------|
| APD Original & 2 Copies | <input checked="" type="checkbox"/> |
| Form 2A (Reclamation) & 1 Copy | <input checked="" type="checkbox"/> |
| Permit Fee (\$200) | <input checked="" type="checkbox"/> |
| Well Location Plat | <input checked="" type="checkbox"/> |
| Copy of Type Map | <input checked="" type="checkbox"/> |
| Plugging Surety | <input type="checkbox"/> |
| Mineral Lease Map | <input type="checkbox"/> |
| Surface Agreement/Surety | <input type="checkbox"/> |
| PA Permit (Form 18) | <input type="checkbox"/> |
| Deviated Drilling Plan | <input type="checkbox"/> |
| Request for Exemption Location | <input type="checkbox"/> |
| Exemption Location Waivers | <input type="checkbox"/> |
| H2S Contingency Plan | <input type="checkbox"/> |
| Federal Drilling Permit (1 Set) | <input type="checkbox"/> |
| Notice of Allocation | <input type="checkbox"/> |
| Send Complete Permit | <input type="checkbox"/> |
| Package to County | <input type="checkbox"/> |

WELL LOCATION INFORMATION

| |
|--|
| 10. Qtr: NE Sec: 5 Twp: 36 Rng: 56W Meridian: 6th |
| 11. Footage From Exterior Section Lines (if directional, submit drilling plan): At Surface: 1100 ENL 2040 FEL If directional, at Top Proposed Prod. Zone: If directional, at Bottom Hole: |
| 12. Ground Elevation: 4730 |
| 13. County: Washington |
| 14. Field Name: WIC Field Number: 99999 |

LEASE, SPACING, AND POOLING INFORMATION

| | | |
|---|--|-----------------------|
| 15. Spacing Order #(s): | 16. # Acres in Unit: 40 | 17. Unit Description: |
| 18. Mineral Ownership: <input checked="" type="checkbox"/> Fee <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Indian | Lease #: | |
| 19. Surface Ownership: <input checked="" type="checkbox"/> Fee <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Indian | | |
| Is the Surface Owner also the Mineral Owner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |
| If No: <input type="checkbox"/> Surface Owners Agreement Attached or <input type="checkbox"/> \$25,000 Blanket Bond <input type="checkbox"/> \$2,000 Bond <input type="checkbox"/> \$5,000 Bond | | |
| 20. Total Acres in Lease: 160 | 21. Describe Entire Lease by Qtr, Sec, Twp, Rng (attach separate sheet/map if required): NE Sec 5 T36S R6W | |
| 22. Is location in a high density area (Rule 603b)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |
| 23. Distance to nearest Lease Line: 600 | 24. Distance to nearest Property Line: 600 | |
| 25. Distance to nearest well completed in the same Formation: N/A | | |
| 26. Distance to nearest building, public road, major above ground utility or railroad: 1100 | | |
| The use of an earthen pit for recompletion fluids requires a pit permit (Rule 905b). | | |

DRILLING PLANS AND PROCEDURES

| | |
|---|--|
| 27. Approx. Spud Date: 11/96 | If Air/Gas Drilling, Notify Local Fire Officials |
| 28. Drilling Contractor Number: 04550 Name: Ashby | Phone #: 303-830-7488 |
| 29. Is H2S Anticipated: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | If yes, attach contingency plan. |
| 30. Will salt (>15,000 ppm TDS Cl) or oil based muds be used during drilling? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 31. Will salt sections be encountered during drilling? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 32. If questions 30 or 31 are yes, is this location in a sensitive area (Rule 903)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 33. Mud disposal: <input type="checkbox"/> Offsite <input checked="" type="checkbox"/> Onsite | |
| Method: <input type="checkbox"/> Land Farming <input type="checkbox"/> Land Spreading <input checked="" type="checkbox"/> Disposal Facility <input type="checkbox"/> Other: | |



00400693

CASING AND CEMENTING PROGRAM

| Size of Hole | Size of Casing | Weight per Foot | Setting Depth | Sls Cement | Cement Bottom | Cement Top |
|----------------------|----------------|-----------------|---------------|------------|---------------|------------|
| 12 3/4 | 8 3/8 | 24 | 130 | 354 | 75 Rem | 308 Life |
| 7 1/8 | 5 1/2 | 14 | 5350 | 175 | 75 Rem | 100 |
| Alternate Stage Tool | | | | | | |

High-b & sh-bond

35. BOP Equipment: ☐ Annular Preventor ☐ Double Ram ☐ Rotating Head ☒ None

36. Comments, if any:

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Randall L. Ward

Signed: [Signature]

Title: Mgr. Partner

Date: 10-12-96

OGCC Approved: [Signature]

Director of OGCC

Date: OCT 31 1996

API NUMBER

05-121-10567

Permit Number: 96-777

Expiration Date:

OCT 30 1997

CONDITIONS OF APPROVAL, IF ANY:

If well is a dry hole set plugs at the following depths: 1) 40' cement plug & sand base. 2) 100' cement plug with 50' below the surface casing shoe extending 50' inside the surface casing (min 40' x 3) 10' x cement plug at top of surface casing, cut surface casing 4' below G.L., weld plate 4) Restore location

DJ Basin