

FORM
2

Rev
10/24

State of Colorado

Energy & Carbon Management Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

404328356

(SUBMITTED)

Date Received:

11/03/2025

APPLICATION FOR PERMIT TO

Drill Deepen Re-enter Recomplete and Operate Amend

TYPE OF WELL OIL GAS COALBE GEOTHERMAL OTHER: _____

Refile

ZONE TYPE SINGLE ZONE MULTIPLE ZONES COMMINGLE ZONES

Sidetrack

Well Name: Outpost 33-8-26 Well Number: 1

Name of Operator: CATAMOUNT ENERGY PARTNERS LLC ECMC Operator Number: 10464

Address: 600 17TH STREET STE 1400S

City: DENVER State: CO Zip: 80202

Contact Name: Nolan Redmond Phone: (720)484-2347 Fax: ()

Email: nredmond@catamountep.com

FINANCIAL ASSURANCE FOR PLUGGING, ABANDONMENT, AND RECLAMATION

ECMC Financial Assurance

The Operator has provided or will provide Financial Assurance to the ECMC for this Well.

Surety ID Number (if applicable): 20240153

Federal Financial Assurance

In checking this box, the Operator certifies that it has provided or will provide at least this amount of Financial Assurance to the federal government for this Well. (Per Rule702.a.)

Amount of Federal Financial Assurance \$ _____

WELL LOCATION INFORMATION

Surface Location

QtrQtr: NENE Sec: 26 Twp: 33N Rng: 8W Meridian: N

Footage at Surface: 837 Feet FNL 960 Feet FEL

Latitude: 37.079979 Longitude: -107.680822

GPS Data: GPS Quality Value: 1.8 Type of GPS Quality Value: PDOP Date of Measurement: 10/31/2024

Ground Elevation: 6579

Field Name: IGNACIO BLANCO Field Number: 38300

Well Plan: is Directional Horizontal (highly deviated) Vertical

If Well plan is Directional or Horizontal attach Deviated Drilling Plan and Directional Data.

Subsurface Locations

Top of Productive Zone (TPZ)

Sec: 26 Twp: 33N Rng: 8W Footage at TPZ: 706 FNL 300 FEL
Measured Depth of TPZ: 7385 True Vertical Depth of TPZ: 6910 FNL/FSL FEL/FWL

Base of Productive Zone (BPZ)										
Sec:	<u>27</u>	Twp:	<u>33N</u>	Rng:	<u>8W</u>	Footage at BPZ:	<u>705</u>	FNL	<u>300</u>	FWL
								FNL/FSL		FEL/FWL
Measured Depth of BPZ:	<u>17346</u>			True Vertical Depth of BPZ:	<u>6910</u>					
Bottom Hole Location (BHL)										
Sec:	<u>27</u>	Twp:	<u>33N</u>	Rng:	<u>8W</u>	Footage at BHL:	<u>706</u>	FNL	<u>150</u>	FWL
								FNL/FSL		FEL/FWL

LOCAL GOVERNMENT PERMITTING INFORMATION

County: LA PLATA Municipality: N/A

Is the Surface Location of this Well in an area designated as one of State interest and subject to the requirements of § 24-65.1-108 C.R.S.? No

Per §34-60-106(1)(f)(I)(A) C.R.S and §37-90.5-107(2)(b)(I) C.R.S, the following questions pertain to the Relevant Local Government approval of the siting of the proposed Oil and Gas or Deep Geothermal Locations.

The Energy and Carbon Management Act and the Geothermal Resources Act provide that when "applying for a permit to drill," operators must include proof that they sought a local government siting permit and the disposition of that permit application, or that the local government does not have siting regulations.

Does the Relevant Local Government regulate the siting of Oil and Gas and Deep Geothermal Locations, with respect to this Location? Yes No

If yes, in checking this box, I hereby certify that an application has been filed with the local government with jurisdiction to approve the siting of the proposed oil and gas location.

The disposition of the application filed with the Relevant Local Government is: In Process Date of Final Disposition: 04/03/2025

Comments: Permit is currently in process.

GEOTHERMAL

Well Overview

The following questions determine informational requirements based on Well type:

Which type of Geothermal Well is this? Select one of the following:

Will this well be constructed using cementing methodologies other than those listed in Rule 408.f?

If Yes, what method will be used:

Please describe the cementing method to be used in detail:

Geothermal Resource Units

Fill out the information below to submit an application for a Geothermal Resource Unit (GRU) as part of the current permit application. This may also be completed later using a Form 4 Sundry.

Will this Well be in an existing GRU?

Are you submitting your application for a new GRU as part of the current application?

SURFACE AND MINERAL OWNERSHIP AT WELL'S OIL & GAS OR DEEP GEOTHERMAL LOCATION

Surface Owner of the land at this Well's Oil and Gas Or Deep Geothermal Location: Fee State Federal Indian

Mineral Owner beneath this Well's Oil and Gas Or Deep Geothermal Location: Fee State Federal Indian

Surface Owner Protection Bond (if applicable): _____ Surety ID Number (if applicable): _____

MINERALS DEVELOPED BY WELL

The ownership of all the minerals that will be developed by this Well is (check all that apply):

- Fee
- State
- Federal
- Indian
- N/A

LEASE INFORMATION

Using standard QtrQtr, Section, Township, Range format describe one entire mineral lease as follows:

* If this Well is within a unit, describe a lease that will be developed by the Well.

* If this Well is not subject to a unit, describe the lease that will be produced by the Well.

(Attach a Lease Map or Lease Description or Lease if necessary.)

E2 NE4 S26 & W2 NW/4 S25, T33N R8W

Total Acres in Described Lease: 160

Described Mineral Lease is: Fee State Federal Indian

Federal or State Lease # _____

SAFETY SETBACK INFORMATION

Distance from Well to nearest:

Building: 1842 Feet
Building Unit: 1945 Feet
Public Road: 5280 Feet
Above Ground Utility: 1348 Feet
Railroad: 5280 Feet
Property Line: 353 Feet

INSTRUCTIONS:

- Specify all distances per Rule 308.b.(1).
- Enter 5280 for distance greater than 1 mile.
- Building - nearest building of any type. If nearest Building is a Building Unit, enter same distance for both.
- Building Unit – as defined in 100 Series Rules.

OBJECTIVE FORMATIONS

Objective Formation(s)	Formation Code	Spacing Order Number(s)	Unit Acreage Assigned to Well	Unit Configuration (N/2, SE/4, etc.)
MANCOS	MNCS	112-309	2560	S26, S27, S23, S22 T33N R8W

Federal or State Unit Name (if appl): _____

Unit Number: _____

Enter 5280 for distance greater than 1 mile.

SUBSURFACE MINERAL SETBACKS

Is this Well within a unit? Yes

If YES:

Enter the minimum distance from the Completed Zone of this Well to the Unit Boundary: 300 Feet

Enter the minimum distance from the Completed Zone of this Well to the Completed Zone of an offset Well within the same unit permitted or completed in the same formation: 1358 Feet

If NO:

Enter the minimum distance from the Completed Zone of this Well to the Lease Line of the described lease: _____ Feet

Enter the minimum distance from the Completed Zone of this Well to the Completed Zone of an offset Well producing from the same lease and permitted or completed in the same formation: _____ Feet

Exception Location

If this Well requires the approval of a Rule 401.c Exception Location, enter the Rule or spacing order number and attach the Exception Location Request and Waivers. _____

SPACING & FORMATIONS COMMENTS

DRILLING PROGRAMProposed Total Measured Depth: 17509 FeetTVD at Proposed Total Measured Depth 6910 Feet

Distance from the proposed wellbore to nearest existing or proposed wellbore belonging to another operator, including plugged wells:

Enter distance if less than or equal to 1,500 feet: 257 Feet No well belonging to another operator within 1,500 feetWill a closed-loop drilling system be used? YesIs H₂S gas reasonably expected to be encountered during drilling operations at concentrations greater than or equal to 100 ppm? No If yes, attach an H₂S Drilling Plan unless a plan was already submitted with the Form 2A per Rule 304.c.(10).Will there be hydraulic fracture treatment at a depth less than 2,000 feet in this well? NoWill salt sections be encountered during drilling? NoWill salt based (>15,000 ppm Cl) drilling fluids be used? YesWill oil based drilling fluids be used? YesBOP Equipment Type: Annular Preventor Double Ram Rotating Head NoneBeneficial reuse or land application plan submitted? No

Reuse Facility ID: _____ or Document Number: _____

CASING PROGRAM

Casing Type	Size of Hole	Size of Casing	Grade	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
SURF	17+1/2	13+3/8	J55	54.5	0	700	865	700	0
1ST	12+1/4	9+5/8	L80	40	0	6453	582	6453	5000
S.C. 1.1	12+1/2	9+5/8	L80	40	0	5000	922	5000	2700
S.C. 1.2	12+1/2	9+5/8	L80	40	0	2700	1082	2700	0
2ND	8+1/2	5+1/2	HCP-110	20	0	17509	1328	17509	4814

 Conductor Casing is NOT planned**POTENTIAL FLOW AND CONFINING FORMATIONS**

Zone Type	Formation /Hazard	Top M.D.	Top T.V.D.	Bottom M.D.	Bottom T.V.D.	TDS (mg/L)	Data Source	Comment
Groundwater	San Jose	0	0	1546	1520	0-500	USGS	
Groundwater	Ojo Alamo	1546	1520	1803	1768	501-1000	USGS	WRI 4188
Confining Layer	Kirtland	1803	1768	2894	2818	1001-10000	USGS	WRI 95-4190
Hydrocarbon	Fruitland	2894	2818	2951	2873	1001-10000	USGS	WRI 4188
Hydrocarbon	Fruitland Coal	2951	2873	3160	3074	1001-10000	USGS	WRI 4188
Hydrocarbon	Pictured Cliffs	3160	3074	3433	3337	1001-10000	USGS	WRI 4188
Confining Layer	Lewis	3433	3337	4724	4580	501-1000	USGS	WRI 4188
Hydrocarbon	Chacra	4724	4580	5103	4945	1001-10000	USGS	WRI 4188
Hydrocarbon	Cliffhouse	5103	4945	5564	5400	1001-10000	USGS	WRI 4188
Confining Layer	Menefee	5564	5400	5724	5560	1001-10000	USGS	WRI 4188
Hydrocarbon	Point Lookout	5724	5560	6166	6002	1001-10000	USGS	WRI 95-4190
Confining Layer	Mancos	6166	6002	7038	6800	1001-10000	USGS	WRI 95-4190
Hydrocarbon	Middle Mancos	7038	6800	17509	6910	1001-10000	USGS	WRI 95-4190

OPERATOR COMMENTS AND SUBMITTALComments This application is in a Comprehensive Area Plan No CAP #: _____

Oil and Gas Development Plan Name Outpost 33-8 OGDID#: 491115

Location ID: 311991

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

Signed: _____ Print Name: Nolan Redmond

Title: Geo/Eng Tech Date: 11/3/2025 Email: nredmond@catamountep.com

Based on the information provided herein, this Application for Permit-to-Drill complies with ECMC Rules, applicable orders, and SB 19-181 and is hereby approved.

ECMC Approved: _____ Director of ECMC Date: _____
Expiration Date: _____

API NUMBER
05

CONDITIONS OF APPROVAL, IF ANY LIST

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.

<u>COA Type</u>	<u>Description</u>
0 COA	

Operator Best Management Practices

<u>No</u>	<u>BMP/COA Type</u>	<u>Description</u>
1	Drilling/Completion Operations	One of the initial wells Mancos Wells on the wellpad will be logged with an OH gamma-ray and resistivity from the base of the intermediate string to the surface casing. All wells on the pad will have a cement bond log with gamma-ray run on production casing (or on intermediate casing if production liner is run) into the surface casing. The horizontal portion of every well will be logged with a measured-while-drilling gamma-ray log. The Form 5, Completion Report, for each well on the pad will list all logs run and have those logs attached. The Form 5 for a well without open-hole logs will state "Alternative Logging Program - No open-hole logs were run" and will clearly identify the type of log and the well (by API#) in which open hole logs were run.

Total: 1 comment(s)

ATTACHMENT LIST

<u>Att Doc Num</u>	<u>Name</u>
404393668	DIRECTIONAL DATA
404394637	WELLBORE DIAGRAM
404394639	DEVIATED DRILLING PLAN
404394804	OffsetWellEvaluations Data
404394806	OffsetWellEvaluations Data
404394810	OffsetWellEvaluations Data

Total Attach: 7 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	RTD for the following: 1) Missing well location plat attachment 2) Update form with new DSU order number information 3) Make any necessary changes as requested by ECMC engineering.	10/28/2025

Total: 1 comment(s)

