

APPLICATION TO DRILL, RECOMPLETE OR REENTER

FORM 1000
REV. 2009

FILE ORIGINAL ONLY

PLEASE TYPE OR USE BLACK INK

OKLAHOMA CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
JIM THORPE BUILDING
P.O. BOX 52000
OKLAHOMA CITY, OK 73152-2000
(RULE 165:10-3-1)

BATCH NUMBER (OCC USE ONLY)

1. OTC/OCC OPERATOR NUMBER
23086

2. API NUMBER
35-153-22534

3. NOTICE OF INTENT TO: (CHECK ONLY ONE)
 DRILL RECOMPLETE REENTER DEEPEN AMEND - REASON
 NOTE: ATTACH COPY OF 1002-A IF RECOMPLETION OR REENTRY.

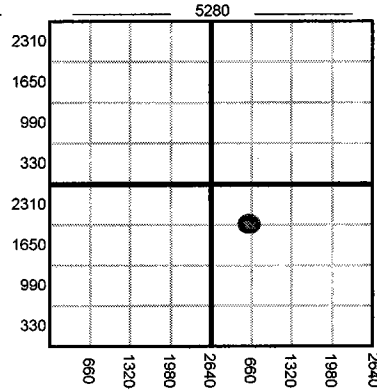
4. TYPE OF DRILLING OPERATION >>>>>>> (NOTE: If directional or horizontal, see reverse side for bottom hole location)

A. STRAIGHT HOLE DIRECTIONAL HOLE HORIZONTAL HOLE
 B. OIL/GAS INJECTION DISPOSAL WATER SUPPLY STRAT TEST SERVICE WELL

6. LOCATE WELL AND OUTLINE LEASE OR SPACING UNIT IN INK.

5. WELL LOCATION:

SECTION	29	TOWNSHIP	21N	RANGE	21W	COUNTY	Woodward
SPOT LOCATION: C NW 1/4 SE 1/4 FEET FROM QUARTER from SOUTH LINE from WEST LINE SECTION LINES: 1,980 FSL 660 FWL							
7. Well will be	1,980 feet from nearest unit or property boundary.						
8. LEASE NAME:	TWF Baird			WELL NUMBER: 29-B			
9. NAME OF OPERATOR	Rock Creek Resources, LLC			EMAIL ADDRESS: bwisner@rockcreekresourcesllc.com			
ADDRESS	700 - 17th Street, Suite 1300			PHONE (AC/NUMBER) 303-382-2170			
CITY	Denver	STATE	CO	ZIP CODE	80202		
10. SURFACE OWNER (ONE ONLY, ATTACH SHEET FOR ADDITIONAL OWNERS) Calvin & Robin White							
ADDRESS	46005 S Couny Road 202						
CITY	Woodward	STATE	OK	ZIP CODE	73801		



11. Is well located on lands under federal jurisdiction?
 Y X N

12. Will a water well be drilled? Y X N
 Will surface water be used? Y X N

13. Date Operation to Begin **ASAP**

14. LIST TARGET FORMATIONS AND DEPTHS OF EACH BELOW (LIMITED TO TEN)

1)	Cottage Grove (405CGGV) @ 7,518'	6)
2)		7)
3)		8)
4)		9)
5)		10)

15. SPACING ORDER NUMBER(S) AND SIZE UNIT(S): **Unitization #472351**

16. PENDING APPLICATION C.D. NO. N/A	17. LOCATION EXCEPTION ORDER NO. N/A	18. INCREASED DENSITY ORDER NO. N/A
19. TOTAL DEPTH 7,703	20. GROUND ELEV. 2,292	21. BASE OF TREATABLE WATER 580'
22. SURFACE CASING 630	23. ALT CASING PROG USED? <input type="checkbox"/> Y <input checked="" type="checkbox"/> X <input type="checkbox"/> N	

24. ALTERNATIVE CASING PROCEDURE, check box and fill in blank (AFFIDAVIT REQUIRED, see reverse side, line 31.)

A. Cement will be circulated from total depth to ground surface on the production casing string.
 B. Cement will be circulated from _____ depth to _____ depth by use of a two stage cementing tool.
 25. 1. PIT INFORMATION: Using more than one pit or mud system? Y N If yes, fill out line 25.2 on top reverse side.
 A. TYPE OF MUD SYSTEM: WATER BASED OIL BASED GAS BASED (AIR DRILL)
 B. EXPECTED MUD CHLORIDE CONTENT: maximum: _____ ppm; average: _____ ppm.
 C. TYPE OF PIT SYSTEM: on-site off-site closed If off-site, specify location: _____
 D. IS DEPTH TO TOP OF GROUND WATER GREATER THAN 10 FT BELOW BASE OF PIT? Y N
 E. WITHIN 1 MILE OF MUNICIPAL WATER WELL? Y N
 F. WELLHEAD PROTECTION AREA? Y N Off-Site Pit No. _____

26.1	A. CATEGORY	1A	1B	2	3	4	C
OCC USE ONLY	B. PIT LOCATION:	Alluvial Plain		Terrace Deposit		Bedrock Aquifer	
	C. Special area or field rule?	Other H.S.A.		Non-H.S.A.		Fm: _____	
	F. SOIL COMPACTED LINER REQUIRED?	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N		D. DEEP SCA?		<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
		G. 20 mil GEOMEMBRANE LINER REQUIRED?		<input type="checkbox"/> Y <input checked="" type="checkbox"/> N		E. CBL required? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	

27. PROPOSED METHOD FOR DISPOSAL OF DRILLING FLUIDS (MUST BE COMPLETED)

- A. Evaporation/dewater and backfilling of reserve pit.
- B. Solidification of pit contents.
- C. Annular Injection (REQUIRES PERMIT and surface casing set 200 feet below base of treatable water-bearing formation.) PERMIT NO. _____
- D. One time land application (REQUIRES PERMIT) PERMIT NO. _____
- E. Haul to Commercial pit facility; Specify site: _____ Order No. _____
- F. Haul to Commercial soil farming facility; Specify site: _____ Order No. _____
- G. Haul to recycling/re-use facility; Specify site: _____ Order No. _____
- H. Other, Specify: **No Drilling Fluids**

I hereby certify I am authorized to submit this two page application prepared by me or under my supervision.
 The facts and proposals made herein are true, correct and complete to the best of my knowledge and belief.

SIGNATURE <i>Brett Wisner</i>	NAME (Print or Type) Brett Wisner, Sr. Landman	PHONE (AC/NO.) 303-382-2170	FAX 303-299-9087	DATE 7/29/2013
----------------------------------	---	--------------------------------	---------------------	-------------------

NOTICE: Approval is void if operations have not commenced within six months of the date of approval. An approved permit must be posted at the location during drilling and completion operations.
 File the Form 1001A, Spud Report, within fourteen days of commencement of operations.

NOTIFY DISTRICT OFFICE 24 HOURS PRIOR TO CEMENTING SURFACE CASING.

25.2. PIT INFORMATION:

- A. TYPE OF MUD SYSTEM: WATER BASED OIL BASED GAS BASED (AIR DRILL)
- B. EXPECTED MUD CHLORIDE CONTENT: maximum: _____ ppm; average: _____ ppm.
- C. TYPE OF PIT SYSTEM: on-site off-site closed If off-site, specify location: _____
- D. IS DEPTH TO TOP OF GROUND WATER GREATER THAN 10 FT BELOW BASE OF PIT? Y N
- E. WITHIN 1 MILE OF MUNICIPAL WATER WELL? Y N Off-Site Pit No. _____
- F. WELLHEAD PROTECTION AREA? Y N

26.2 OCC USE ONLY A. CATEGORY 1A 1B 2 3 4 C Fm: _____

B. PIT LOCATION: Alluvial Plain Terrace Deposit Bedrock Aquifer Other H.S.A. Non-H.S.A.

C. Special area or field rule? _____ D. DEEP SCA? Y N E. CBL? Y N

F. SOIL COMPACTED LINER REQUIRED? Y N G. 20 mil GEOMEMBRANE LINER REQUIR! Y N

29 Bottom Hole Location SEC TWP RGE COUNTY

for Directional Hole:

SPOT LOCATION: FEET FROM QUARTER from SOUTH LINE from WEST LINE
SECTION LINES:

1/4 1/4 1/4 1/4

Measured Total True Vertical BHL from nearest Lease, Unit, Or Property Line:
Depth Depth

30. Bottom Hole Location for Horizontal Hole: (LATERALS)

LATERAL #1: SEC TWP RGE COUNTY

SPOT LOCATION: FEET FROM QUARTER from SOUTH LINE from WEST LINE
SECTION LINES:

1/4 1/4 1/4 1/4

Depth of Deviation Radius of Turn Direction Total Length

Measured Total True Vertical End Point location from nearest lease, unit
Depth Depth or property line:

LATERAL #2: SEC TWP RGE COUNTY

SPOT LOCATION: FEET FROM QUARTER from SOUTH LINE from WEST LINE
SECTION LINES:

1/4 1/4 1/4 1/4

Depth of Deviation Radius of Turn Direction Total Length

Measured Total True Vertical End Point location from nearest lease, unit
Depth Depth or property line:

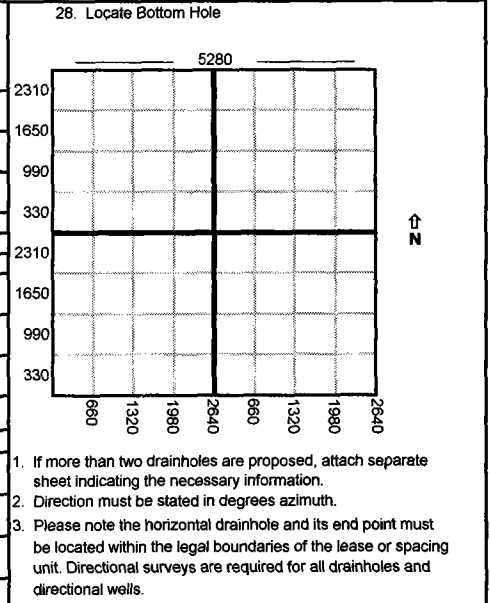
LATERAL #3: SEC TWP RGE COUNTY

SPOT LOCATION: FEET FROM QUARTER from SOUTH LINE from WEST LINE
SECTION LINES:

1/4 1/4 1/4 1/4

Depth of Deviation Radius of Turn Direction Total Length

Measured Total True Vertical End Point location from nearest lease, unit
Depth Depth or property line:



31. AFFIDAVIT FOR ALTERNATIVE CASING PROGRAM (Signature on front of this form attests to this affidavit)

- This well WILL WILL NOT penetrate any known lost circulation zones.
- During the drilling of this well, withdrawals from any water well within 1/4 mile WILL WILL NOT exceed 50 gallons per minute.
- The projected depth of the well IS IS NOT less than 100 feet from the top of any enhanced recovery project or gas storage facility.
- List the following for all water wells within 1/4 mile of this well. (Information concerning some water wells may be obtained from the OKLAHOMA WATER RESOURCES BOARD, 3800 N. Classen Blvd., Oklahoma City, OK 73118). IF NO WATER WELLS FOUND, SO STATE. (ATTACH ADDITIONAL SHEET IF NECESSARY)

Name of Owner/Operator	Address of Owner/Operator	Location (Nearest 1/4 1/4 1/4 1/4))	Depth of Well

- A cement bond log is required to be run and submitted from not less than 100 feet below the base of the treatable water-bearing formation to the surface. **OCC USE ONLY**
- If casing depth is more than 250 feet deeper than base of the treatable water-bearing formation, operator must submit a letter of request listing reasons and precautions to be taken.

INTENT TO DRILL CHECKLIST OCC USE ONLY OCC USE ONLY

APPROVED *Jh* REJECTED _____

1. SURETY
A. NONE filed.
B. EXPIRED: Date 9-26-13
C. OUTSTANDING CONTEMPT ORDER.

4. GEOLOGY

DO NOT WRITE INSIDE THIS BOX

RECEIPT 1400920007
OKLA CORP CONM
Date: 07/31/2013 Time: 09:53
Case: 0000000000 Cashier: R85
Payor: ROCK CREEK RESOURCES
Check: 3239 \$175.00
46 Intent to Drill