



APPLICATION FOR PERMIT TO DRILL

Type of work: Drill New Well Reenter Well Drill Directional Well Other _____

Type of well: Oil Well Gas Well Injection Other _____

DAKOTA
 STATE GEOLOGICAL & SURVEY
 WESTERN FIELD OFFICE

Name and Address of Operator: Peter K. Roosevelt 518 17th Street Suite 1140, Denver, CO 80202 Telephone 303-825-8606

Name and Address of Surface Owner: Ralph Miller 702 5 Ave. , Edgemont, SD 57735 Telephone 605-662-7226

Name and Address of Drilling Contractor and Rig Number:
 Unknown

Surface Location of well: Qtr-Qtr, Sec, Twp, Rge, County, feet from nearest lines of section, and latitude and longitude (if available):
 NWNE Sec. 11, T9S, R2E, Fall River, SD
 800' FNL, 1998' FEL

If Directional, top of pay and bottom hole location from nearest lines of section:
 N/A

Acres in Spacing (Drilling) Unit: 40 ac Description of Spacing Unit: NWNE

Well Name and Number		Elevation	Field and Pool, or Wildcat	Proposed Depth and Formation	
2-11 Miller State		3538.5 gl	Wildcat	2700 Ft.	Leo
Size of Hole	Size of Casing	Weight per Foot	Depth	Cementing Program (amount, type, additives)	Depth
1) 12 1/4"	8 5/8"	24#	175'	1) 175 sacks of class G cement or sufficient to circulate to the surface.	175'
2) 7 7/8"	5 1/2"	14#	2700'	2) 100 sacks of Lite cement & 150 sacks of class G. Plus sufficient cement	2700'
3)					
4)					

Describe Proposed Operations (Clearly State all Pertinent Details, and Give Pertinent Dates, Including Estimated Date of Starting any Proposed Work). Use additional page(s) if appropriate.
 2) conti. — to circulate to a point above the Fall River formation.

Drill 12 1/4" surface hole, run 8 5/8" casing and cement to the surface. Drill 7 7/8" hole to 2700'. Log, evaluate, and run 5 1/2" casing to 2700' or plug and abandon according to the rules of the State of SD. Pits will be lined with 12 ml. liner.

I hereby certify that the foregoing as to any work or operation performed is a true and correct report of such work or operation.

P.K. Roosevelt Signature Peter K. Roosevelt Name (Print) Operator Title Oct. 20, 2005 Date

FOR OFFICE USE ONLY

Approved By: [Signature] Title: O.G. Supervisor
 Permit No. 1771 API No. 40 047 20322 Date Issued: NOV 16 2005
 Conditions, if any, on attached page.