

FORM
2
Rev
12/05

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

APPLICATION FOR PERMIT TO:

1. Drill, Deepen, Re-enter, Recomplete and Operate

2. TYPE OF WELL

OIL GAS COALBED OTHER _____
SINGLE ZONE MULTIPLE ZONE COMMINGLE ZONE

Refiling
Sidetrack

Document Number:
1757000
Plugging Bond Surety
20030009

3. Name of Operator: NOBLE ENERGY INC 4. COGCC Operator Number: 100322

5. Address: 1625 BROADWAY STE 2200
City: DENVER State: CO Zip: 80202

6. Contact Name: MARICLARK Phone: (281)876-6105 Fax: (281)876-2503
Email: MCLARK@NOBLEENERGYINC.COM

7. Well Name: SHABLE E USX AB Well Number: 11-02

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

9. Proposed Total Measured Depth: 7000

WELL LOCATION INFORMATION

10. QtrQtr: NWNE Sec: 11 Twp: 7N Rng: 64W Meridian: 6

Latitude: 40.593150 Longitude: -104.513580

Footage at Surface: 660 FNL/FSL FNL 1900 FEL/FWL FEL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 4877 13. County: WELD

14. GPS Data:

Date of Measurement: 05/06/2009 PDOP Reading: 4.7 Instrument Operator's Name: DAVID C. HOLMES

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: 400

18. Distance to nearest property line: 660 19. Distance to nearest well permitted/completed in the same formation: 1414

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.)
CODELL	CODL		80	N2NE4
NIOBRARA	NBRR		80	N2NE4

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 Bon \$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):
T7N-R64W, SEC. 11: ALL

25. Distance to Nearest Mineral Lease Line: 660 26. Total Acres in Lease: 640

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 27 or 28 are yes, is this location in a sensitive area (Rule 903)? Yes No **If 28, 29, or 30 are "Yes" a pit permit may be required.**

31. Mud disposal: Offsite Onsite

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	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bottom	Cement Top
SURF	12+1/4	8+5/8	24	750	312	750	0
1ST	7+7/8	4+1/2	11.6	7,000	621	7,000	

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

33. Comments NO CONDUCTOR CASING WILL BE USED.

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: Y Print Name: MARI CLARK

Title: REGULATORY ANALYST II Date: 6/18/2009 Email: MCLARK@NOBLEENERGYIN

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: David S. Nashin Director of COGCC Date: 9/27/2009

API NUMBER
05 123 30616 00

Permit Number: 20092713 Expiration Date: 9/26/2010

CONDITIONS OF APPROVAL, IF ANY: _____

Condition of Approval

Comment

Agency

1) PROVIDE 24 HR NOTICE OF SPUD TO ED BINKLEY AT 970-506-9834 OR E-MAIL AT ED.BINKLEY@STATE.CO.US . 2) SET SURFACE CASING TO 750' MINIMUM, PER RULE 317D, CEMENT TO SURFACE. SETTING SURFACE CASING LESS THAN THE APPROVED DEPTH IS A PERMIT VIOLATION UNLESS PRIOR WRITTEN APPROVAL IS OBTAINED FROM THE COGCC. 3) IF COMPLETED, PROVIDE CEMENT COVERAGE FROM TD TO A MINIMUM OF 200' ABOVE NIOBRARA. VERIFY COVERAGE WITH CEMENT BOND LOG. 4) IF DRY HOLE, 40 SKS CEMENT 50' ABOVE NIOBRARA TOP, 50 SKS CEMENT ½ OUT, ½ IN SURFACE CASING, 10 SKS CEMENT TOP OF SURFACE CASING, CUT 4' BELOW GL, WELD ON PLATE, 5 SKS CEMENT IN RAT HOLE 5 SKS CEMENT IN MOUSE HOLE. RESTORE SURFACE LOCATION.

Attachment Check List

Att Doc Num	Name	Doc Description
1757000	APD ORIG & 1 COPY	LF@2086876 1757000
1757001	WELL LOCATION PLAT	LF@2086878 1757001
1757002	SURFACE AGRMT/SURETY	LF@2086881 1757002
1757003	30 DAY NOTICE LETTER	LF@2086877 1757003

Total Attach: 4 Files