

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



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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:
1757896
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: EILEENROBERTS Phone: (303)228-4330 Fax: (303)228-4286
Email: EROBERTS@NOBLEENERGYINC.COM

7. Well Name: KUNZMAN W Well Number: 05-09

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

9. Proposed Total Measured Depth: 7585

WELL LOCATION INFORMATION

10. QtrQtr: NESE Sec: 5 Twp: 2N Rng: 66W Meridian: 6
Latitude: 40.165750 Longitude: -104.793410

Footage at Surface: 2153 FNL/FSL FSL 491 FEL/FWL FEL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 4923 13. County: WELD

14. GPS Data:

Date of Measurement: 04/23/2009 PDOP Reading: 1.3 Instrument Operator's Name: STEVEN A. LUND

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: 3053

18. Distance to nearest property line: 491 19. Distance to nearest well permitted/completed in the same formation: 744

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	407-87	80	E2SE4
NIOBRARA	NBRR	407-87	80	E2SE4

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#: 20030012

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):
SEE ATTACHED DESCRIPTION

25. Distance to Nearest Mineral Lease Line: 491 26. Total Acres in Lease: 5741

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	730	305	730	0
1ST	7+7/8	4+1/2	11.6	7,585	457	7,585	

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: _____ Print Name: EILEEN ROBERTS

Title: REGULATORY SPECIALIST Date: 7/22/2009 Email: EROBERTS@NOBLEENERGY

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. Noshin Director of COGCC Date: 9/29/2009

API NUMBER 05 123 30664 00	Permit Number: _____	Expiration Date: 9/28/2010
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CONDITIONS OF APPROVAL, IF ANY: _____

Condition of Approval

Comment

Agency

1) Provide 24 hour notice of MIRU to Jim Precup at 303-469-1902 or e-mail at james.precup@state.co.us 2) Comply with Rule 317.i and provide cement coverage from TD to a minimum of 200' above Niobrara and from 200' below Sussex to 200' above Sussex. Verify coverage with cement bond log.

Attachment Check List

Att Doc Num	Name	Doc Description
1757896	APD ORIG & 1 COPY	LF@2108453 1757896
1757905	WELL LOCATION PLAT	LF@2108454 1757905
1757906	LEGAL/LEASE DESCRIPTION	LF@2108455 1757906
1757907	30 DAY NOTICE LETTER	LF@2108456 1757907
1769104	SURFACE CASING CHECK	LF@2123290 1769104

Total Attach: 5 Files