

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

Refilling
Sidetrack

Document Number:

1758121

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: (303)228-4413 Fax: (303)228-4286
Email: MCLARK@NOBLEENERGYINC.COM

7. Well Name: GUTTERSEN STATE D Well Number: 16-22D

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

9. Proposed Total Measured Depth: 7205

WELL LOCATION INFORMATION

10. QtrQtr: NWSE Sec: 16 Twp: 3N Rng: 64W Meridian: 6
Latitude: 40.223760 Longitude: -104.554040

Footage at Surface: 2056 FNL/FSL FSL 2046 FEL/FWL FEL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 4771 13. County: WELD

14. GPS Data:

Date of Measurement: 04/29/2009 PDOP Reading: 1.8 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 FNL FSL FEL/FWL FNL/FSL FNL/FWL
2580 FNL 1420 FEL 2580 FNL 1420 FEL
Sec: 16 Twp: 3N Rng: 64W Sec: 16 Twp: 3N Rng: 64W

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: 2046 19. Distance to nearest well permitted/completed in the same formation: 799

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	160	GWA
NIOBRARA	NBRR	407-87	160	GWA

21. Mineral Ownership: Fee State Federal Indian Lease #: 70/7884-S

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):
SECTION 16, T3N, R64W: ALL

25. Distance to Nearest Mineral Lease Line: 2046 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	600	252	600	0
1ST	7+7/8	4+1/2	11.6	7,205	652	7,205	2

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

33. Comments NO CONDUCTOR CASING WILL BE USED. WELL IS TO BE TWINNED WITH EXSTING SPIKE STATE D16-10. AS DRILLED SUNDRY FORM 4 SUBMITTED 7/24/09.

34. Location ID: 328376

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: MARI CLARK

Title: REGULATORY ANALYST II Date: 8/3/2009 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. Neslin Director of COGCC Date: 9/30/2009

API NUMBER
05 123 30687 00

Permit Number: _____ Expiration Date: 9/29/2010

CONDITIONS OF APPROVAL, IF ANY: _____

Condition of Approval

Comment

Agency

1) Provide 24 hour notice of MIRU to Ed Binkley at 970-506-9834 or e-mail at ed.binkley@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 to 200' above Sussex. Verify coverage with cement bond log. Restore surface location.

Attachment Check List

Att Doc Num	Name	Doc Description
1758121	APD ORIG & 1 COPY	LF@2115694 1758121
1758132	WELL LOCATION PLAT	LF@2116881 1758132
1758133	30 DAY NOTICE LETTER	LF@2116883 1758133
1758134	DEVIATED DRILLING PLAN	LF@2116885 1758134
1758135	PROPOSED SPACING UNIT	LF@2116887 1758135
1940392	SURFACE CASING CHECK	LF@2130792 1940392

Total Attach: 6 Files