

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:

400005383

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: LINDA PAVELKA Phone: (303)228-4064 Fax: (303)228-4280

Email: lpavelka@nobleenergyinc.com

7. Well Name: LONG Well Number: 20-12B

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

9. Proposed Total Measured Depth: 10431

WELL LOCATION INFORMATION

10. QtrQtr: SWNW Sec: 20 Twp: 7S Rng: 94W Meridian: 6

Latitude: 39.425751 Longitude: -107.915641

FNL/FSL

FEL/FWL

Footage at Surface: 2181 FNL 1081 FWL

11. Field Name: RULISON Field Number: 75400

12. Ground Elevation: 7908 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 09/18/2008 PDOP Reading: 2.5 Instrument Operator's Name: RICHARD BULLEN

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
1766 FNL 733 FWL 1788 FNL 688 FWL
Sec: 20 Twp: 7S Rng: 94W Sec: 20 Twp: 7S Rng: 94W16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No

17. Distance to the nearest building, public road, above ground utility or railroad: 1281

18. Distance to nearest property line: 863 19. Distance to nearest well permitted/completed in the same formation: 5333

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.)
ILES	ILES	139-73	40	SWNW
WILLIAMS FORK	WMFK	139-73	40	SWNW

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):
PLEASE SEE ATTACHED OIL AND GAS LEASE

25. Distance to Nearest Mineral Lease Line: _____ 471 _____ 26. Total Acres in Lease: _____ 160 _____

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
CONDUCTOR	20	16	LINE PIPE	120	0	120	0
SURF	12+1/4	8+5/8	24#	1,500	575	1,500	0
3RD	7+7/8	4+1/2	11.6#	10,421	730	10,421	0

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

33. Comments THIS WELL IS IN THE RULISON TIER 2, DOE NOTICE LETTER WAS SENT ON 9/17/09- RETURN RECEIPT ATTACHED, THE CONDUCTOR CASING WILL BE CEMENTED WITH 3 YARDS OF CEMENT, THE PRODUCTION CASING CEMENT TOP WILL BE 200' ABOVE TOG, THIS WELL IS PART OF THE LONG 20F PAD

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: LINDA PAVELKA

Title: REGULATORY MANAGER Date: 9/17/2009 Email: lpavelka@nobleenergyinc.com

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: _____ Director of COGCC Date: _____

Permit Number: _____ Expiration Date: _____

API NUMBER

05

CONDITIONS OF APPROVAL, IF ANY:**Attachment Check List**

Att Doc Num	Name	Doc Description
400005746	WELL LOCATION PLAT	Long 20-12B well location plat.pdf
400005748	TOPO MAP	Topo map.pdf
400005749	SURFACE AGRMT/SURETY	Surface Use Agreement.pdf
400005750	30 DAY NOTICE LETTER	30 day notice letter.pdf
400005751	DEVIATED DRILLING PLAN	Long 20-12B_Deviated Drilling Plan.pdf
400005847	CORRESPONDENCE	DOE notice letter and return receipt.pdf
400005848	OIL & GAS LEASE	Oil and Gas lease.pdf

Total Attach: 7 Files