

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:

1774628

Plugging Bond Surety

3. Name of Operator: EOG RESOURCES INC4. COGCC Operator Number: 277425. Address: 600 17TH ST STE 1100NCity: DENVER State: CO Zip: 802026. Contact Name: KAYLENE GARDNER Phone: (435)781-9111 Fax: (435)789-7633Email: KAYLENE_GARDNER@EOGRESOURCES.COM7. Well Name: JERSEY Well Number: 12-25H

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

9. Proposed Total Measured Depth: 12884

WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 25 Twp: 11N Rng: 63W Meridian: 6Latitude: 40.899539 Longitude: -104.388719Footage at Surface: 450 FNL/FSL 450 FNL/FWL11. Field Name: UNNAMED Field Number: 8525112. Ground Elevation: 5177 13. County: WELD

14. GPS Data:

Date of Measurement: 09/10/2009 PDOP Reading: 1.7 Instrument Operator's Name: BRANDON BOWTHORPE15. If well is ☐ Directional ☒ Horizontal (highly deviated) **submit deviated drilling plan.**Footage at Top of Prod Zone: FNL/FSL 788 FNL 788 FNL/FWL 600 FSL 600 FNL/FWL 600 FEL
Sec: _____ Twp: _____ Rng: _____ Sec: 25 Twp: 11N Rng: 63W16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 682 ft18. Distance to nearest property line: 600 ft 19. Distance to nearest well permitted/completed in the same formation: 2 mi

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.) |
|------------------------|----------------|-------------------------|-------------------------------|--------------------------------------|
| NIOBRARA | NBRR | | | |

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):
640 ACRES DESCRIBED AS FOLLOWS: T11N-R 63W OF THE 6TH P.M. ALL OF SECTION 25.

25. Distance to Nearest Mineral Lease Line: 450 ft 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: BACKFILL & COVER

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 | | 60 | | 0 | 0 |
| SURF | 13+1/2 | 9+5/8 | 36 | 1,350 | 650 | 1,350 | 0 |
| 1ST | 8+3/4 | 7 | 23 | 7,425 | 785 | 7,425 | 0 |
| 2ND | 6+1/4 | 4+1/2 | 11.6 | 12,884 | 450 | 12,884 | 6,575 |

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

33. Comments _____

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: KAYLENE GARDNER

Title: REG ADMIN Date: _____ Email: KAYLENE_GARDNER@EOGR

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:

All representations, stipulations and conditions of approval stated in the Form 2A for this location shall constitute representations, stipulations and conditions of approval for this Form 2 Permit-to-Drill and are enforceable to the same extent as all other representations, stipulations and conditions of approval stated in this Permit-to-Drill.

Attachment Check List

| Att Doc Num | Name | Doc Description |
|-------------|------------------------|--------------------|
| 1774628 | APD ORIGINAL | LF@2183959 1774628 |
| 1774629 | WELL LOCATION PLAT | LF@2183961 1774629 |
| 1774630 | TOPO MAP | LF@2183963 1774630 |
| 1774631 | MINERAL LEASE MAP | LF@2183965 1774631 |
| 1774632 | DEVIATED DRILLING PLAN | LF@2183967 1774632 |
| 1774633 | DRILLING PLAN | LF@2183969 1774633 |

Total Attach: 6 Files