

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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Document Number:

2089076

Plugging Bond Surety

APPLICATION FOR PERMIT TO:

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

2. TYPE OF WELL

OIL GAS COALBED OTHER NONE ENTERED
SINGLE ZONE MULTIPLE ZONE COMMINGLE ZONE

Refiling

Sidetrack

3. Name of Operator: EOG RESOURCES INC 4. COGCC Operator Number: 27742

5. Address: 600 17TH ST STE 1100N

City: DENVER State: CO Zip: 80202

6. Contact Name: JENNIFER YU Phone: (303)824-5576 Fax: (303)824-5577

Email: JENNIFER_YU@EOG REOURCES.COM

7. Well Name: SIMBA Well Number: 1-06

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

9. Proposed Total Measured Depth: 9700

WELL LOCATION INFORMATION

10. QtrQtr: NWNE Sec: 6 Twp: 11N Rng: 62W Meridian: 6

Latitude: 40.955631 Longitude: -104.362244

Footage at Surface: 1100 FNL/FSL FNL 2472 FEL/FWL FWL

11. Field Name: UNNAMED Field Number: 85251

12. Ground Elevation: 5352 13. County: WELD

14. GPS Data:

Date of Measurement: 09/01/2009 PDOP Reading: 1.6 Instrument Operator's Name: UINTAH ENGINEERING & LAND SUREVY

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: 2824 ft

18. Distance to nearest property line: 1000 ft 19. Distance to nearest well permitted/completed in the same formation: 4691 ft

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.)
LYONS	LYNS		1275	

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):
SEE THE ATTACHED OIL & GAS LEASE

25. Distance to Nearest Mineral Lease Line: 1000 ft 26. Total Acres in Lease: 4691

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
SURF	12+1/4	8+5/8	24	500	300	500	0
1ST	7+7/8	5+1/2	17	9,700	1,200	9,700	0

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: JENNFER YU

Title: LEAD REG ASST Date: _____ Email: ARAWSON@NOBLEENERGYI

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: _____

API NUMBER	Permit Number: _____	Expiration Date: _____
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
2089076	APD ORIGINAL	LF@2195253 2089076
2089078	TOPO MAP	LF@2195256 2089078
2089079	WELL LOCATION PLAT	LF@2195255 2089079
2089080	OIL & GAS LEASE	LF@2195257 2089080
2089084	DRILLING PLAN	LF@2195258 2089084
2089086	SURFACE AGRMT/SURETY	LF@2195254 2089086

Total Attach: 6 Files