

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:

400017624

Plugging Bond Surety

20030009

3. Name of Operator: NOBLE ENERGY INC 4. COGCC Operator Number: 1003225. Address: 1625 BROADWAY STE 2200City: DENVER State: CO Zip: 802026. Contact Name: LINDA PAVELKA Phone: (303)228-4064 Fax: (303)228-4286Email: lpavelka@nobleenergyinc.com7. Well Name: BATTLEMENT MESA Well Number: 34-44B

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

9. Proposed Total Measured Depth: 10619

WELL LOCATION INFORMATION

10. QtrQtr: SWSE Sec: 34 Twp: 7S Rng: 95W Meridian: 6Latitude: 39.388348 Longitude: -107.979884
 Footage at Surface: 629 FNL/FSL FSL 1642 FEL/FWL FEL
11. Field Name: RULISON Field Number: 7540012. Ground Elevation: 9054 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 08/28/2007 PDOP Reading: 2.3 Instrument Operator's Name: ROBERT WOOD15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**Footage at Top of Prod Zone: FNL/FSL 829 FSL 702 FEL FEL Bottom Hole: FNL/FSL 829 FSL 702 FEL FELSec: 34 Twp: 7S Rng: 95W Sec: 34 Twp: 7S Rng: 95W16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 4210 ft18. Distance to nearest property line: 325 ft 19. Distance to nearest well permitted/completed in the same formation: 323 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.)
WILLIAMS FORK	WMFK	139-53	640	SESE

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 LEASE ON FILE

25. Distance to Nearest Mineral Lease Line: 702 ft 26. Total Acres in Lease: 3721

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: EVAP PIT.

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	30	16	LINE PIPE	150	175	150	0
SURF	14+3/4	9+5/8	36	3,300	1,275	3,300	0
1ST	8+3/4	4+1/2	11.6	10,609	1,000	10,609	

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

33. Comments THE PRODUCTION CASING TOP OF CEMENT WILL BE 200' ABOVE TOP OF GAS.
SURFACE PARASITE STRING TO 3000 FEET.
ALL CONDITIONS ARE THE SAME AS PRIOR APPROVED PERMIT.
THE PAD AND ACCESS ROADS WERE NOT BUILT.
THE LOCATION DOES NOT REQUIRE A VARIANCE FROM ANY OF THE RULES LISTED IN RULE 306.d.(1).(A).(ii).
THE LOCATION IS NOT IN A WILDLIFE RESTRICTED SURFACE OCCUPANCY AREA.
DOE WAS NOTIFIED AGAIN ON 12/9/2009 OF TIER 2 PROJECT RULISON SAP STATUS.
SURFACE OWNER IS CHEVRON.
THE DRILLING PLANS WERE CHANGED FROM PREVIOUS APPROVED PERMIT.
THE MUD DISPOSAL WILL BE TO AN EVAPORATION PIT.

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: _____ 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: _____

API NUMBER
05 045 17168 00

Permit Number: _____ Expiration Date: _____

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
400020534	30 DAY NOTICE LETTER	_Pad 34O-30day Notice.pdf
400021284	PLAT	BM 34-44B-Plat.pdf
400021285	CORRESPONDENCE	_Pad 34O-DOE Letter.pdf

Total Attach: 3 Files