

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:  
1760261  
Plugging Bond Surety

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

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@EOGRESOURCES.COM  
7. Well Name: LAMOTTA Well Number: 5-01M  
8. Unit Name (if appl): \_\_\_\_\_ Unit Number: \_\_\_\_\_  
9. Proposed Total Measured Depth: 7900

WELL LOCATION INFORMATION

10. QtrQtr: SWNE Sec: 1 Twp: 11N Rng: 63W Meridian: 6  
Latitude: 40.953518 Longitude: -104.378453  
Footage at Surface: 1885 FNL/FSL FNL 1834 FEL/FWL FEL  
11. Field Name: WILDCAT Field Number: 99999  
12. Ground Elevation: 5298 13. County: WELD

14. GPS Data:

Date of Measurement: 09/09/2009 PDOP Reading: 1.0 Instrument Operator's Name: UINTAH ENGINEERING

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: 3444 ft

18. Distance to nearest property line: 1834 ft 19. Distance to nearest well permitted/completed in the same formation: 1580 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.)
CORDELL	CODL			

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):  
SECTION 1, T11N, R3W OF THE 6TH P.M.

25. Distance to Nearest Mineral Lease Line: 1834 ft 26. Total Acres in Lease: 643

### 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 AND 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		560	325	560	0
1ST	7+7/8	5+1/2		7,780	920	7,780	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: JENNIFER YU

Title: REGULATORY Date: \_\_\_\_\_ Email: JENNIFER.YU@EOGRESOUR

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: \_\_\_\_\_

<b>API NUMBER</b> 05 123 30556 00	Permit Number: _____ Expiration Date: _____
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**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
1760261	APD ORIGINAL	LF@2202514 1760261
1760264	SURFACE AGRMT/SURETY	LF@2202515 1760264

Total Attach: 2 Files