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	STATE OF COLORADO OIL & GAS	DE	ET	OE	ES

Document Number: 1760261

Plugging Bond Surety 20030058

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.)
CODELL	CODL			
CORDELL	CODL			

21. Mineral Ownership:	☒ Fee	☐ State	☐ Federal	☐ Indian	Lease #: _____

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: 12/22/2009   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: _David S. Neslin_   **Director of COGCC**   Date: 1/26/2010

API NUMBER
05 123 30556 00

Permit Number: _____   Expiration Date: 1/25/2011

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.

COGCC ENG COA - SME 1) Provide 24 hr notice of spud to Colby Horton at 970-467-2517 or colby.horton@state.co.us. 2) Set surface casing per Rule 317d, setting surface casing less than the approved depth is a permit violation unless prior written approval is obtained from the COGCC. 3) If completed, cement coverage shall be at a minimum from the TD to 200' above Niobrara and at minimum set stage cement from 1350' to 50' above the surface casing shoe. Verify all placed cement with cement bond log and cementing tickets. 4) If dry hole, 40 sks cement 50' above Niobrara top, 40 sks cement 1450', 50 sks cement ½ out, ½ in surface casing, 10 sks cement top of surface casing, cut 4' below GL, weld on plate, 5 sks cement in rat hole & 5 sks cement in mouse hole. Restore surface location.

Attachment Check List

Att Doc Num	Name	Doc Description
1725447	SURFACE CASING CHECK	LF@2208684|1725447.00000
1760261	APD ORIGINAL	LF@2202514|1760261
1760264	SURFACE AGRMT/SURETY	LF@2202515|1760264
400024167	FORM 2 SUBMITTED	LF@2207320|400024167

Total Attach: 4 Files