

**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



DE	ET	OE	ES
----	----	----	----

Document Number:  
400031302  
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: Nick Mathis Phone: (303)262-2894 Fax: (303)262-2895  
Email: Nick\_Mathis@eogresources.com  
7. Well Name: Fox Creek Well Number: 05-28H  
8. Unit Name (if appl): \_\_\_\_\_ Unit Number: \_\_\_\_\_  
9. Proposed Total Measured Depth: 12532

**WELL LOCATION INFORMATION**

10. QtrQtr: SESE Sec: 28 Twp: 12N Rng: 63W Meridian: 6  
Latitude: 40.974508 Longitude: -104.430539  
Footage at Surface: 501 FNL/FSL FSL 501 FEL/FWL FEL  
11. Field Name: Wildcat Field Number: 99999  
12. Ground Elevation: 5463 13. County: WELD

14. GPS Data:  
Date of Measurement: 01/05/2010 PDOP Reading: 2.1 Instrument Operator's Name: Uintah Engineering & Land Surveying

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 \_\_\_\_\_  
778 FSL 891 FEL 1500 FNL 600 FWL  
Sec: 28 Twp: 12N Rng: 63W Sec: 28 Twp: 12N Rng: 63W

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: 497 ft  
18. Distance to nearest property line: 501 ft 19. Distance to nearest well permitted/completed in the same formation: 7600 ft

**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	NA		NA

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#: 20090114

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):  
SE/4, N/2 Section 26, All Section 28, All Section 34 T12N R63W, of the 6th P.M.

25. Distance to Nearest Mineral Lease Line: 501 ft 26. Total Acres in Lease: 1760

### 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: Bacfill 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
CONDUCTOR	20	16		60		0	0
SURF	13+1/2	9+5/8	36	1,620	845	1,620	0
1ST	8+3/4	7	23	7,820	825	7,820	0
1ST LINER	6+1/4	4+1/2	11.6	12,532	680	12,532	6,970

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: Nick Mathis

Title: Regulatory Assistant Date: \_\_\_\_\_ Email: Nick\_Mathis@eogresources.co

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
400031327	WELL LOCATION PLAT	Fox Creek 05-28H Well Location Plat.pdf
400031329	TOPO MAP	Fox Creek 05-28H Topo Map.pdf
400031331	DEVIATED DRILLING PLAN	Fox Creek 5-28H_APD directional plan.pdf
400031332	DEVIATED DRILLING PLAN	Fox Creek 5-28H_APD directional report.pdf
400031333	DRILLING PLAN	Fox Creek 5-28H_APD Drilling Plan.pdf
400031351	SURFACE AGRMT/SURETY	Fox Creek 05-28H SUA SUB.pdf

Total Attach: 6 Files