

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:
400027246
Plugging Bond Surety
20030009

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: NOBLE ENERGY INC 4. COGCC Operator Number: 100322
5. Address: 1625 BROADWAY STE 2200
City: DENVER State: CO Zip: 80202
6. Contact Name: KATE SHIRLEY Phone: (303)228-4449 Fax: (303)228-4280
Email: kshirley@nobleenergyinc.com
7. Well Name: ALOYSIUS C Well Number: 34-27D
8. Unit Name (if appl): _____ Unit Number: _____
9. Proposed Total Measured Depth: 7102

WELL LOCATION INFORMATION

10. QtrQtr: NENE Sec: 34 Twp: 4N Rng: 64W Meridian: 6
Latitude: 40.274610 Longitude: -104.529920
Footage at Surface: 595 FNL/FSL FNL 654 FEL/FWL FEL
11. Field Name: WATTENBERG Field Number: 90750
12. Ground Elevation: 4688 13. County: WELD

14. GPS Data:

Date of Measurement: 11/17/2009 PDOP Reading: 4.4 Instrument Operator's Name: DAVID C. HOLMES

15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL 75 FNL 1320 FEL 75 FEL 1320 FEL
Sec: 34 Twp: 4N Rng: 64W Sec: 34 Twp: 4N Rng: 64W

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: 550 ft
18. Distance to nearest property line: 595 ft 19. Distance to nearest well permitted/completed in the same formation: 902 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	407-87	160	GWA
NIOBRARA	NBRR	407-87	160	GWA

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#: 20030012

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 34 Township 4N Range 64W: NE/4

25. Distance to Nearest Mineral Lease Line: 75 ft 26. Total Acres in Lease: 160

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: Closed Loop

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	600	252	600	0
1ST	7+7/8	4+1/2	11.6	7,102	636	7,102	

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

33. Comments NO CONDUCTOR CASING WILL BE USED. TOC=200' ABOVE THE NIOBRARA. Unit configuration for both the Codell and Niobrara: N/2NE/4 of Sec. 34 and S/2SE/4 of Sec. 27

34. Location ID: 322923

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: KATE SHIRLEY

Title: REGULATORY SPECIALIST Date: 1/21/2010 Email: kshirley@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: David S. Neslin Director of COGCC Date: 2/26/2010

API NUMBER
05 123 31190 00

Permit Number: _____ Expiration Date: 2/25/2012

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 hour notice of MIRU to Bo Brown at 970-330-6085 or email at bo.brown@state.co.us. 2) Comply with Rule 317.i and provide cement coverage from TD to a minimum of 200' above Niobrara and from 200' below to 200' above Sussex. Verify coverage with cement bond log. 4) Comply with Rule 321. Run and submit Directional Survey from TD to base of surface casing. Ensure that the wellbore complies with setback requirements in commission orders or rules prior to producing the well.

Attachment Check List

Att Doc Num	Name	Doc Description
1725545	SURFACE CASING CHECK	LF@2420308 1725545
400030663	30 DAY NOTICE LETTER	LF@2395120 400030663
400030664	WELL LOCATION PLAT	LF@2395125 400030664
400030665	DEVIATED DRILLING PLAN	LF@2221223 400030665
400030666	PROPOSED SPACING UNIT	LF@2221224 400030666
400030770	FORM 2 SUBMITTED	LF@2221225 400030770

Total Attach: 6 Files