

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:  
400048966  
Plugging Bond Surety  
20030058

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: Amber Schaller Phone: (303)824-5582 Fax: (303)824-5583  
Email: amber\_schaller@eogresources.com

7. Well Name: Peach Well Number: 3-12H

8. Unit Name (if appl): \_\_\_\_\_ Unit Number: \_\_\_\_\_

9. Proposed Total Measured Depth: 12055

WELL LOCATION INFORMATION

10. QtrQtr: SESW Sec: 12 Twp: 11N Rng: 61W Meridian: 6  
Latitude: 40.930356 Longitude: -104.153739

Footage at Surface: 501 FNL/FSL FSL 2550 FEL/FWL FWL

11. Field Name: Wildcat Field Number: 99999

12. Ground Elevation: 5298 13. County: WELD

14. GPS Data:

Date of Measurement: 01/21/2010 PDOP Reading: 1.8 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 885 FSL 2351 FWL \_\_\_\_\_ Bottom Hole: FNL/FSL 600 FNL 600 FWL \_\_\_\_\_  
Sec: 12 Twp: 11N Rng: 61W Sec: 12 Twp: 11N Rng: 61W

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: 501 ft

18. Distance to nearest property line: 501 ft 19. Distance to nearest well permitted/completed in the same formation: 5280 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.)
Niobrara	NBRR			

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#: 20030058

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 attached.

25. Distance to Nearest Mineral Lease Line: 600 ft 26. Total Acres in Lease: 640

### 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
CONDUCTOR	20	16		60		60	0
SURF	13+1/2	9+5/8	36	1,250	650	1,250	0
1ST	8+3/4	7	23	7,915	835	7,915	0
1ST LINER	6+1/4	4+1/2	11.6	12,055	370	12,055	7,065

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

33. Comments No well producing from the same formation was located within 1 mile from the proposed location.

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: Amber Schaller

Title: Regulatory Assistant Date: 3/23/2010 Email: amber\_schaller@eogresources.

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>	Permit Number: _____	Expiration Date: _____
05	<b>CONDITIONS OF APPROVAL, IF ANY:</b>	

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
400049036	PLAT	Legal Plat.pdf
400049038	TOPO MAP	Topo Map.pdf
400049039	DEVIATED DRILLING PLAN	Deviated Drlg Plan.pdf
400049040	DRILLING PLAN	Drlg Plan wBOPE.pdf
400049143		Lease Description.pdf

Total Attach: 5 Files