

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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| DE | ET | OE | ES |
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Document Number:

400051197

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: 6-33H

8. Unit Name (if appl): _____ Unit Number: _____

9. Proposed Total Measured Depth: 12582

WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 33 Twp: 12N Rng: 63W Meridian: 6

Latitude: 40.972206 Longitude: -104.443631

Footage at Surface: 360 FNL/FSL FNL 1095 FEL/FWL FWL

11. Field Name: Wildcat Field Number: 99999

12. Ground Elevation: 5473.2 13. County: WELD

14. GPS Data:

Date of Measurement: 01/12/2010 PDOP Reading: 3.1 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 _____

634 FNL 1471 FWL 1150 FSL 600 FEL

Sec: 33 Twp: 12N Rng: 63W Sec: 33 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: 210 ft

18. Distance to nearest property line: 217 ft 19. Distance to nearest well permitted/completed in the same formation: 3335 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 | 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):
All of Section 33, T12N R63W of the 6th P.M.

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 | | 0 | 0 |
| SURF | 13+1/2 | 9+5/8 | 36 | 1,620 | 845 | 1,620 | 0 |
| 1ST | 8+3/4 | 7 | 23 | 7,854 | 830 | 7,854 | 0 |
| 1ST LINER | 6+1/4 | 4+1/2 | 11.6 | 12,582 | 410 | 12,582 | 7,003 |

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: 3/31/2010 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 |
|-------------|------------------------|----------------------|
| 400051207 | WELL LOCATION PLAT | LF@2447291 400051207 |
| 400051208 | TOPO MAP | LF@2447292 400051208 |
| 400051209 | DEVIATED DRILLING PLAN | LF@2447293 400051209 |
| 400051210 | DEVIATED DRILLING PLAN | LF@2447294 400051210 |
| 400051211 | DRILLING PLAN | LF@2447295 400051211 |

Total Attach: 5 Files