

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:
400038405
Plugging Bond Surety
20030009

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 MILLER Phone: (303)228-4449 Fax: (303)228-4280
Email: kmiller@nobleenergyinc.com

7. Well Name: DICKENS F Well Number: 32-17D

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

9. Proposed Total Measured Depth: 7353

WELL LOCATION INFORMATION

10. QtrQtr: SWNE Sec: 32 Twp: 5N Rng: 65W Meridian: 6
Latitude: 40.357400 Longitude: -104.684360

Footage at Surface: 2067 FNL/FSL FNL 1813 FEL/FWL FEL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 4668 13. County: WELD

14. GPS Data:

Date of Measurement: 12/07/2009 PDOP Reading: 1.9 Instrument Operator's Name: ROBERT DALEY

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
1200 FNL 1200 FEL 1200 FNL 1200 FEL
Sec: 32 Twp: 5N Rng: 65W Sec: 32 Twp: 5N Rng: 65W

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: 332 ft

18. Distance to nearest property line: 488 ft 19. Distance to nearest well permitted/completed in the same formation: 510 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 | NE/4 |
| NIOBRARA | NBRR | 407-87 | 160 | NE/4 |

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):
T5N, R65W, Sec. 32: N/2NE/4

25. Distance to Nearest Mineral Lease Line: 128 ft 26. Total Acres in Lease: 80

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 SYSTEM

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 | 525 | 226 | 525 | 0 |
| 1ST | 7+7/8 | 4+1/2 | 11.6 | 7,353 | 673 | 7,353 | |

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

33. Comments NO CONDUCTOR CASING WILL BE USED. TOC=200' ABOVE THE NIOBRARA. This well is part of the Dickens F32-07X pad and will be drilled with the proposed Dickens F32-07X, Dickens F32-27D, and Dickens F32-28D wells.

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: KATE MILLER

Title: REGULATORY ANALYST Date: 4/1/2010 Email: kmiller@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: _____ 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 |
|-------------|------------------------|--|
| 400051732 | WELL LOCATION PLAT | Dickens F32-17D well location plat.pdf |
| 400051733 | SURFACE AGRMT/SURETY | Dickens F32-17D SUA.pdf |
| 400051735 | 30 DAY NOTICE LETTER | Dickens F32-17D 30 day notice letter.pdf |
| 400051736 | DEVIATED DRILLING PLAN | Dickens F32-17D Deviated Drilling Plan.pdf |

Total Attach: 4 Files