

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:
400039259
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: 32-28D

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

9. Proposed Total Measured Depth: 7669

WELL LOCATION INFORMATION

10. QtrQtr: SWNE Sec: 32 Twp: 5N Rng: 65W Meridian: 6
Latitude: 40.357360 Longitude: -104.684630

Footage at Surface: 2080 FNL/FSL FNL 1887 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: 1.8 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 _____
75 FNL 2561 FEL 75 FNL 2561 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: 562 ft 19. Distance to nearest well permitted/completed in the same formation: 933 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	see comments
NIOBRARA	NBRR	407-87	160	see comments

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: SWNE

25. Distance to Nearest Mineral Lease Line: 75 ft 26. Total Acres in Lease: 40

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	7,669	720	7,669	

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 is T5N, R65W, Sec. 29: SE/4SW/4, SW/4SE/4 & Sec. 32: NW/4NE/4, NE/4NW/4. This well is part of the Dickens F32-07X pad and will be drilled with the proposed Dickens F32-07X, Dickens F32-17D, and Dickens F32-27D 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: _____

API NUMBER	Permit Number: _____	Expiration Date: _____
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
400051739	WELL LOCATION PLAT	Dickens F32-28D well location plat.pdf
400051741	SURFACE AGRMT/SURETY	Dickens F32-28D SUA.pdf
400051745	30 DAY NOTICE LETTER	Dickens F32-28D 30 day notice letter.pdf
400051748	DEVIATED DRILLING PLAN	Dickens F32-28D Deviated Drilling Plan.pdf
400051750	PROPOSED SPACING UNIT	Dickens F32-28D Proposed Spacing Unit.pdf

Total Attach: 5 Files