

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:

400061666

Plugging Bond Surety

20030009

3. Name of Operator: NOBLE ENERGY INC 4. COGCC Operator Number: 1003225. Address: 1625 BROADWAY STE 2200City: DENVER State: CO Zip: 802026. Contact Name: Cheryl Johnson Phone: (303)228-4437 Fax: (303)228-4286Email: cheryljohnson@nobleenergyinc.com7. Well Name: Cannon H Well Number: 35-21

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

9. Proposed Total Measured Depth: 7750

WELL LOCATION INFORMATION

10. QtrQtr: NWSE Sec: 35 Twp: 3N Rng: 65W Meridian: 6Latitude: 40.181240 Longitude: -104.630710Footage at Surface: 2499 FNL/FSL FSL 2497 FEL/FWL FEL11. Field Name: Wattenberg Field Number: 9075012. Ground Elevation: 4850 13. County: WELD

14. GPS Data:

Date of Measurement: 04/12/2010 PDOP Reading: 1.7 Instrument Operator's Name: Robert Daley15. 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 _____

Sec: _____ Twp: _____ Rng: _____ Sec: _____ Twp: _____ Rng: _____

16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 3500 ft18. Distance to nearest property line: 155 ft 19. Distance to nearest well permitted/completed in the same formation: 791 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	CDLL	407-87	160	GWA
JSand	JSND	232-23	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#: _____

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 attachment

25. Distance to Nearest Mineral Lease Line: 155 ft 26. Total Acres in Lease: 5709

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	700	250	700	
1ST	7+7/8	4+1/2	11.6	7,750	732	7,750	

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

33. Comments Conductor Casing will not be used. TOC = 200' above Niobrara. Rule 603A.2 has been duly noted by Noble field staff and as always precautions will be taken. Unit configuration should read: SWNE, SENW, NESW, NW/SE. This well will use facilities at Cannon H35-24 Tank.

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: Cheryl Johnson

Title: Regulatory Analyst Date: _____ Email: cheryljohnson@nobleenergyinc

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 05	Permit Number: _____ Expiration Date: _____
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
400071025	30 DAY NOTICE LETTER	Cannon H35-21 30 Day Notice.pdf
400071026	PLAT	Cannon H35-21 Plat.pdf
400071027	EXCEPTION LOC WAIVERS	Cannon H35-21 Except Waiver Ltr.pdf
400071030	EXCEPTION LOC REQUEST	Cannon H35-21 Loc Except Rqst Ltr.pdf
400071031	PROPOSED SPACING UNIT	Cannon H35-21 Proposed Spacing Unit.pdf
400071035	SURFACE AGRMT/SURETY	Cannon H35-21 SUA.pdf
400071232	LEGAL/LEASE DESCRIPTION	Cannon H35-21 Lease Desc.pdf

Total Attach: 7 Files