

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



DE	ET	OE	ES
----	----	----	----

Document Number:

400068187

Plugging Bond Surety

20030009

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: NOBLE ENERGY INC 4. COGCC Operator Number: 100322

5. Address: 1625 BROADWAY STE 2200
City: DENVER State: CO Zip: 80202

6. Contact Name: Susan Miller Phone: (303)228-4246 Fax: (303)228-4286
Email: smiller@nobleenergyinc.com

7. Well Name: LYSTER Well Number: E26-22D

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

9. Proposed Total Measured Depth: 7240

WELL LOCATION INFORMATION

10. QtrQtr: NESE Sec: 26 Twp: 6N Rng: 65W Meridian: 6

Latitude: 40.455270 Longitude: -104.625750

Footage at Surface: 2037 FNL/FSL FSL 658 FEL/FWL FEL

11. Field Name: Greeley Field Number: 32760

12. Ground Elevation: 4688 13. County: WELD

14. GPS Data:

Date of Measurement: 04/19/2010 PDOP Reading: 1.1 Instrument Operator's Name: Lat40°, LLC

15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL 2496 FSL 1387 FEL/FWL FEL Bottom Hole: FNL/FSL 2496 FSL 1387 FEL/FWL FEL
Sec: 26 Twp: 6N Rng: 65W Sec: 26 Twp: 6N 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: 624 ft

18. Distance to nearest property line: 430 ft 19. Distance to nearest well permitted/completed in the same formation: 891 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	26: S/2NE/4, N/2SE/4
Niobrara	NBRR	407-87	160	26: S/2NE/4, N/2SE/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#: 20030012

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 Mineral Lease Description map.

25. Distance to Nearest Mineral Lease Line: 44 ft 26. Total Acres in Lease: 189

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	580	240	580	0
1ST	7+7/8	4+1/2	11.6	7,240	657	7,240	

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

33. Comments No conductor casing will be used. First string top of cement will be 200' above the Niobrara formation. This well will twin the existing Lyster 9-26EG (straight hole). An as-drilled GPS sundry notice was filed for the Lyster 9-26EG.

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: Susan Miller

Title: Regulatory Analyst II Date: _____ Email: smiller@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
400068203	30 DAY NOTICE LETTER	30 day.pdf
400073112	WELL LOCATION PLAT	Approved Plat.pdf
400073113	DEVIATED DRILLING PLAN	Dir Drilling Plan.pdf
400074384	MINERAL LEASE MAP	Mineral Lease Description Map.pdf
400074385	PROPOSED SPACING UNIT	318Ae Spacing Unit Map.pdf
400074386	PROPOSED SPACING UNIT	318Ae Spacing Unit Plat.pdf
400074387	PROPOSED SPACING UNIT	318Ae 100% Request Ltr.pdf

Total Attach: 7 Files