

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

Refilling
Sidetrack

Document Number:
400077397
Plugging Bond Surety
20030058

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: Jennifer Yu Phone: (303)824-5576 Fax: (303)824-5576
Email: jennifer_yu@eogresources.com

7. Well Name: Lion Creek Well Number: 03-14H

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

9. Proposed Total Measured Depth: 13069

WELL LOCATION INFORMATION

10. QtrQtr: SESE Sec: 14 Twp: 11N Rng: 64W Meridian: 6
Latitude: 40.914783 Longitude: -104.505069

Footage at Surface: 501 FNL/FSL FNL 601 FEL/FWL FEL

11. Field Name: Wildcat Field Number: 99999

12. Ground Elevation: 5344 13. County: WELD

14. GPS Data:

Date of Measurement: 05/12/2010 PDOP Reading: 2.3 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 839 FSL 938 FEL 600 FEL/FWL 600 FWL 600 FWL
Sec: 14 Twp: 11N Rng: 64W Sec: 14 Twp: 11N Rng: 64W

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: 501 ft

18. Distance to nearest property line: 501 19. Distance to nearest well permitted/completed in the same formation: 5280 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			

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):
All of Section 14, T11N, R64W, NW of Section 15, T11N, R64W

25. Distance to Nearest Mineral Lease Line: 600 ft 26. Total Acres in Lease: 800

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: Back fill 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+1/16		42	60	50	60	0
SURF	13+1/2	9+5/8	36	1,545	805	1,545	0
1ST	8+3/4	7	23	7,630	805	7,630	0
1ST LINER	6+1/4	4+1/2	11.6	13,069	380	13,069	6,880

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: Jennifer Yu

Title: Lead Regulatory Assistant Date: 7/17/2010 Email: jennifer_yu@eogresources.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: David S. Neslin Director of COGCC Date: 8/20/2010

API NUMBER
05 123 32032 00

Permit Number: _____ Expiration Date: 8/19/2012

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.

COGCC ENG COA - SME

- 1) Provide 24 hr notice of MIRU to Bo Brown at 970-330-6085 or email at bo.brown@state.co.us.
- 2) Set surface casing per Rule 317d, cement to surface. Setting surface casing less than the approved depth is a permit violation unless prior written approval is obtained from the COGCC.
- 3) If completed, provide cement coverage from the intermediate casing shoe to a minimum of 200' above Niobrara. Verify cement with a cement bond log.
- 4) If the production liner is cemented, verify cement with a cement bond log.
- 5) Comply with Rule 321. Run and submit Directional Survey from TD to base of surface casing. Ensure that the wellbore complies with setback requirements in commission orders or rules prior to producing the well.

Attachment Check List

Att Doc Num	Name	Doc Description
1726068	SURFACE CASING CHECK	LF@2524194 1726068
400077397	FORM 2 SUBMITTED	LF@2509085 400077397
400077412	DEVIATED DRILLING PLAN	LF@2509086 400077412
400077413	DRILLING PLAN	LF@2509087 400077413
400077414	PLAT	LF@2509088 400077414
400077415	TOPO MAP	LF@2509089 400077415

Total Attach: 6 Files

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