

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:

400079952

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)228-426Email: cheryljohnson@noblenergyinc.com7. Well Name: NCLP PC Well Number: AA04-20

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

9. Proposed Total Measured Depth: 7000

WELL LOCATION INFORMATION

10. QtrQtr: SWNW Sec: 4 Twp: 6N Rng: 63W Meridian: 6Latitude: 40.516170 Longitude: -104.446470Footage at Surface: 2490 FNL/FSL FNL 1320 FEL/FWL FWL11. Field Name: Wattenberg Field Number: 9075012. Ground Elevation: 4708 13. County: WELD

14. GPS Data:

Date of Measurement: 06/15/2010 PDOP Reading: 1.2 Instrument Operator's Name: Brian Brinkman15. 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: 2451 ft18. Distance to nearest property line: 141 ft 19. Distance to nearest well permitted/completed in the same formation: 776 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	Unspaced	160	See comments
Niobrara	NBRR	Unspaced	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):
T6N-R63W: Section 4 W/2

25. Distance to Nearest Mineral Lease Line: 1175 ft 26. Total Acres in Lease: 289

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	500	210	500	0
1ST	7+7/8	4+1/2	11.6	7,000	620	7,000	

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

33. Comments Conductor casing won't be used for this well. 1st String TOC = 200 ft above Niobrara. Noble requests approval of Rule 603.a.(2) exception location for proposed well located 141 feet from the nearest property line, request letter and signed waiver attached. Unit configuration: S/2NW and N/2SW of Section 4.

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 II 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
400090124	30 DAY NOTICE LETTER	NCLP PC AA04-20 30 Day Ltr.pdf
400090125	PLAT	NCLP PC AA04-20 Plat.pdf
400090126	EXCEPTION LOC WAIVERS	NCLP PC AA04-20 318A3 Exception Waiver.pdf
400090128	EXCEPTION LOC REQUEST	NCLP PC AA04-20 318A a Surf Excpt Rqst.pdf
400090129	EXCEPTION LOC REQUEST	NCLP PC AA04-20 Property Line Rqst.pdf
400090130	EXCEPTION LOC WAIVERS	NCLP PC AA04-20 Property Line Waiver Ltr.pdf
400090132	PROPOSED SPACING UNIT	NCLP PC AA04-20 Spacing Unit Rqst.pdf

Total Attach: 7 Files