

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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Document Number:

400107509

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: MARI CLARK Phone: (303)228-4413 Fax: (303)228-4286
Email: mclark@nobleenergyinc.com

7. Well Name: STATE D Well Number: 01-30D

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

9. Proposed Total Measured Depth: 7416

WELL LOCATION INFORMATION

10. QtrQtr: NWSW Sec: 36 Twp: 4N Rng: 64W Meridian: 6

Latitude: 40.266040 Longitude: -104.506570

Footage at Surface: 1569 feet FNL/FSL FSL 616 feet FEL/FWL FWL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 4737 13. County: WELD

14. GPS Data:

Date of Measurement: 09/24/2010 PDOP Reading: 1.9 Instrument Operator's Name: DAVID C HOLMES

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

Footage at Top of Prod Zone: FNL/FSL 75 FNL 75 FEL 75 FEL 75
Bottom Hole: FNL/FSL 75 FNL 75 FEL 75 FEL 75
Sec: 2 Twp: 3N Rng: 64W Sec: 2 Twp: 3N 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: 5281 ft

18. Distance to nearest property line: 616 ft 19. Distance to nearest well permitted/completed in the same formation: 700

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#: 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 Bond ☐ \$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):
N/2 SECTION 2, T3N, R64W

25. Distance to Nearest Mineral Lease Line: 75 ft 26. Total Acres in Lease: 320

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	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
SURF	12+1/4	8+5/8	24		600	196	600	0
1ST	7+7/8	4+1/2	11.6		7,416	630	7,416	

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

33. Comments NO CONDUCTOR CASING WILL BE USED. 1ST STRING TOP OF CEMENT = 200' ABOVE NIOBRARA. UNIT CONFIGURATION = SE/SE OF SECTION 35, SW/SW OF SECTION 36, NW/NW OF SECTION 1 & THE NE/NE OF SECTION 2. WELL IS TO BE TWINNED WITH PROPOSED STATE C36-32D, STATE C36-33D & STATE C36-99HZ CREATING A 4 WELL PAD.

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: MARI CLARK

Title: REG. ANALYST II Date: _____ Email: mclark@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

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.

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Attachment Check List

Att Doc Num	Name
400128693	WELL LOCATION PLAT
400128694	30 DAY NOTICE LETTER
400128695	DEVIATED DRILLING PLAN
400128696	EXCEPTION LOC REQUEST
400128697	EXCEPTION LOC WAIVERS
400128698	PROPOSED SPACING UNIT

Total Attach: 6 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)

BMP

Type	Comment

Total: 0 comment(s)