

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:

400128090

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: Kaylene Gardner Phone: (435)781-9111 Fax: (435)789-7633
Email: Kaylene_Gardner@eogresources.com

7. Well Name: Fiscus Mesa Well Number: 15-17H

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

9. Proposed Total Measured Depth: 10276

WELL LOCATION INFORMATION

10. QtrQtr: SESW Sec: 17 Twp: 9N Rng: 58W Meridian: 6

Latitude: 40.745272 Longitude: -103.888994

Footage at Surface: 501 feet FNL/FSL FSL 2412 feet FEL/FWL FWL

11. Field Name: Wildcat Field Number: 99999

12. Ground Elevation: 4868 13. County: WELD

14. GPS Data:

Date of Measurement: 10/22/2010 PDOP Reading: 1.4 Instrument Operator's Name: Robert Kay

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

Footage at Top of Prod Zone: FNL/FSL 942 FSL 2226 FEL/FWL FWL Bottom Hole: FNL/FSL 600 FNL 600 FEL/FWL FWL
Sec: 17 Twp: 9N Rng: 58W Sec: 17 Twp: 9N Rng: 58W

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: 5993 ft

18. Distance to nearest property line: 834 ft 19. Distance to nearest well permitted/completed in the same formation: 5810 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 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):
Please see attached lease description.

25. Distance to Nearest Mineral Lease Line: 600 ft 26. Total Acres in Lease: 4368

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: Backfill 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	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
CONDUCTOR	20	16	42	0	60	50	60	0
SURF	13+1/2	9+5/8	36	0	800	420	800	0
1ST	8+3/4	7	23	0	6,178	655	6,178	0
1ST LINER	6	4+1/2	11.6	5428	10,276	300	10,276	5,428

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

33. Comments Spacing application has been filed.

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: Kaylene Gardner

Title: Sr. Regulatory Admin. Date: _____ Email: Kaylene_Gardner@eogresourc

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
400128167	DEVIATED DRILLING PLAN
400128168	DRILLING PLAN
400128170	PLAT
400128171	TOPO MAP
400128985	LEGAL/LEASE DESCRIPTION

Total Attach: 5 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)

BMP

<u>Type</u>	<u>Comment</u>

Total: 0 comment(s)