

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:  
2584322  
Plugging Bond Surety  
20030009

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: ANDREA RAWSON Phone: (303)228-4253 Fax: (303)228-4286  
Email: ARAWSON@NOBLEENERGYINC.COM

7. Well Name: RHOO STATE D Well Number: 36-07Ji

8. Unit Name (if appl): \_\_\_\_\_ Unit Number: \_\_\_\_\_

9. Proposed Total Measured Depth: 7659

WELL LOCATION INFORMATION

10. QtrQtr: SWNE Sec: 36 Twp: 3N Rng: 64W Meridian: 6  
Latitude: 40.184090 Longitude: -104.497840

Footage at Surface: 1842 feet FNL 2060 feet FEL  
FNL/FSL FEL/FWL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 4822 13. County: WELD

14. GPS Data:

Date of Measurement: 06/06/2007 PDOP Reading: 2.5 Instrument Operator's Name: PAUL TAPPY

15. 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  No

17. Distance to the nearest building, public road, above ground utility or railroad: 200 ft

18. Distance to nearest property line: 137 ft 19. Distance to nearest well permitted/completed in the same formation: 935 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	80	W/2NE/4
NIOBRARA	NBRR	407-87	80	W/2NE/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#: \_\_\_\_\_

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):  
T3N, R64W, SEC 36 ALL

25. Distance to Nearest Mineral Lease Line: 1842 ft 26. Total Acres in Lease: 640

### 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 28 or 29 are yes, is this location in a sensitive area (Rule 901.e)?  Yes  No

31. Mud disposal:  Offsite  Onsite **If 28, 29, or 30 are "Yes" a pit permit may be required.**

Method:  Land Farming  Land Spreading  Disposal Facility Other: \_\_\_\_\_

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		774	605	774	0
1ST	7+7/8	4+1/2	11.6		7,498	220	7,498	6,182

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

33. Comments **A FORM 2A IS NOT REQUIRED FOR THIS RECOMPLETION BECAUSE NO PIT WILL BE CONSTRUCTED AND THERE WILL BE NO ADDITIONAL SURFACE DISTURBANCE BEYOND THE ORIGINALLY DISTURBED AREA.**

34. Location ID: 305548

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: ANDREA RAWSON

Title: REGULATORY Date: 9/22/2010 Email: ARAWSON@NOBLEENERGYI

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: 10/30/2010

<b>API NUMBER</b>	Permit Number: _____	Expiration Date: <u>10/29/2012</u>
05 123 23131 00	<b>CONDITIONS OF APPROVAL, IF ANY:</b>	

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 Prior to recompletion, operator must: 1) Provide 24 hour notice of MIRU to Bo Brown at 970-330-6085 or email at bo.brown@state.co.us 2) Upon well recompletion operator shall file a COGCC Form 5A, Completion Interval Report.

**Attachment Check List**

Att Doc Num	Name
2584322	APD APPROVED
2584323	SURFACE AGRMT/SURETY
400105014	APD ORIGINAL

Total Attach: 3 Files

**General Comments**

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Permission from opr-Andrea to remove surf bond info	9/27/2010 3:55:19 PM

Total: 1 comment(s)

**BMP**

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

Total: 0 comment(s)