


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		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">DE</td> <td style="width: 25%;">ET</td> <td style="width: 25%;">OE</td> <td style="width: 25%;">ES</td> </tr> </table>	DE	ET	OE	ES
DE	ET	OE	ES				
APPLICATION FOR PERMIT TO:			Document Number: 400150834 Plugging Bond Surety 20100152				
1. <input checked="" type="checkbox"/> Drill, <input type="checkbox"/> Deepen, <input type="checkbox"/> Re-enter, <input type="checkbox"/> Recomplete and Operate							
2. TYPE OF WELL OIL <input checked="" type="checkbox"/> GAS <input type="checkbox"/> COALBED <input type="checkbox"/> OTHER _____ SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/> COMMINGLE ZONE <input type="checkbox"/>		Refiling <input type="checkbox"/> Sidetrack <input type="checkbox"/>					
3. Name of Operator: <u>CONTINENTAL RESOURCES INC</u>		4. COGCC Operator Number: <u>10347</u>					
5. Address: <u>PO BOX 1032</u> City: <u>ENID</u> State: <u>OK</u> Zip: <u>73703</u>							
6. Contact Name: <u>Pam Combest</u> Phone: <u>(580)5485213</u> Fax: <u>(580)5485293</u> Email: <u>pamcombest@suddenlink.net</u>							
7. Well Name: <u>Marconi</u>		Well Number: <u>1-1H</u>					
8. Unit Name (if appl): _____		Unit Number: _____					
9. Proposed Total Measured Depth: <u>15765</u>							
WELL LOCATION INFORMATION							
10. QtrQtr: <u>Lot 1</u> Sec: <u>1</u> Twp: <u>7N</u> Rng: <u>62W</u> Meridian: <u>6</u> Latitude: <u>40.609044</u> Longitude: <u>-104.261407</u>							
Footage at Surface: <u>504</u> feet FNL/FSL <u>FNL</u> 660 feet FEL/FWL <u>FEL</u>							
11. Field Name: <u>GWA</u>		Field Number: _____					
12. Ground Elevation: <u>4917</u>		13. County: <u>WELD</u>					
14. GPS Data: Date of Measurement: <u>04/27/2011</u> PDOP Reading: <u>1.5</u> Instrument Operator's Name: <u>Paul A. Valdez</u>							
15. If well is <input type="checkbox"/> Directional <input checked="" type="checkbox"/> Horizontal (highly deviated) submit deviated drilling plan. Footage at Top of Prod Zone: FNL/FSL <u>984</u> FNL <u>660</u> FEL <u>660</u> FEL/FWL <u>660</u> FSL <u>660</u> FEL <u>660</u> Sec: <u>1</u> Twp: <u>7N</u> Rng: <u>62W</u> Sec: <u>12</u> Twp: <u>7N</u> Rng: <u>62W</u>							
16. Is location in a high density area? (Rule 603b)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
17. Distance to the nearest building, public road, above ground utility or railroad: <u>1894</u> ft							
18. Distance to nearest property line: <u>504</u> ft 19. Distance to nearest well permitted/completed in the same formation: <u>1093</u> 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	535-9	1280	Sec 1 & 12			

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

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#: 20100153

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):
All of Sections 1 & 12-T7N-R62W

25. Distance to Nearest Mineral Lease Line: 660 ft 26. Total Acres in Lease: 1280

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: Evaporation and backfill

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	50	0	60	30	60	0
SURF	13+1/2	9+5/8	36	0	550	679	550	0
1ST	8+3/4	7	26	0	6,869	1,156	6,869	0
1ST LINER	6	4+1/2	11.6	6026	15,765			

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: Pam Combest

Title: Regulatory Compliance Date: 4/8/2011 Email: pamcombest@contres.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. Nesline Director of COGCC Date: 6/23/2011

API NUMBER

05 123 33692 00

Permit Number: _____ Expiration Date: 6/22/2013

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.

- 1) Provide 24 hour notice of MIRU to Bo Brown at 970-397-4124 or e-mail at bo.brown@state.co.us.
- 2) Provide cement coverage from base of intermediate casing to a minimum of 200' above Niobrara. Verify coverage with cement bond log.
- 3) 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
400150834	FORM 2 SUBMITTED
400169388	WELL LOCATION PLAT
400169389	DEVIATED DRILLING PLAN

Total Attach: 3 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Spacing approved in April.	6/16/2011 1:34:20 PM
Permit	On hold to verify lease coverage and to verify spacing order has been filed.(1106-sp-52)	5/27/2011 3:41:45 PM
Permit	Requesting a Exception Location Request letter to the Director. and correction of lot number from 4 to 1. plg.	4/11/2011 10:39:32 AM

Total: 3 comment(s)

BMP

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

Total: 0 comment(s)