

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  COMMINGLE

Refiling   
Sidetrack

Document Number:

400223202

PluggingBond SuretyID

20100152

3. Name of Operator: CONTINENTAL RESOURCES INC

4. COGCC Operator Number: 10347

5. Address: PO BOX 1032

City: ENID State: OK Zip: 73703

6. Contact Name: Pam Combest Phone: (580)548-5213 Fax: (580)548-5293

Email: pamcombest@contres.com

7. Well Name: Reines Well Number: 1-1H

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

9. Proposed Total Measured Depth: 10250

WELL LOCATION INFORMATION

10. QtrQtr: SE SW Sec: 1 Twp: 7N Rng: 60W Meridian: 6

Latitude: 40.598256 Longitude: -104.042867

Footage at Surface: 390 feet FSL 1982 feet FWL

11. Field Name: Wildcat Field Number: 99999

12. Ground Elevation: 4929 13. County: WELD

14. GPS Data:

Date of Measurement: 11/16/2011 PDOP Reading: 1.3 Instrument Operator's Name: L. Kelley Stevenson

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

Footage at Top of Prod Zone: FNL/FSL 869 FSL 1982 FWL 660 FNL 1980 FWL  
Bottom Hole: FNL/FSL 660 FNL 1980 FWL  
Sec: 1 Twp: 7N Rng: 60W Sec: 1 Twp: 7N Rng: 60W

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: 4867 ft

18. Distance to nearest property line: 440 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 2625 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		640	All Sec 1

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):

W/2 of Section 1-7N-60W

25. Distance to Nearest Mineral Lease Line: 390 ft 26. Total Acres in Lease: 229

### 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: Backfill and Evaporate

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	238	550	0
1ST	8+3/4	7	26	0	6,532	1,136	6,532	0
1ST LINER	6	4+1/2	11.6	5730	10,250			

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: 12/2/2011 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: \_\_\_\_\_ 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
400223202	FORM 2 SUBMITTED
400228702	WELL LOCATION PLAT
400228703	DEVIATED DRILLING PLAN

Total Attach: 3 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)