

FORM
2

Rev
12/05

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

400351305

Date Received:

01/08/2013

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

PluggingBond SuretyID

20100152

3. Name of Operator: CONTINENTAL RESOURCES INC

4. COGCC Operator Number: 10347

5. Address: PO BOX 269000

City: OKLAHOMA CITY State: OK Zip: 73126

6. Contact Name: Christi Scritchfield Phone: (405)234-9257 Fax: (405)234-9562

Email: christi.scratchfield@clr.com

7. Well Name: Leggett Well Number: 1-5H

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

9. Proposed Total Measured Depth: 10590

WELL LOCATION INFORMATION

10. QtrQtr: NWSW Sec: 5 Twp: 7N Rng: 60W Meridian: 6

Latitude: 40.602362 Longitude: -104.125416

Footage at Surface: 1970 feet FNL/FSL FSL 250 feet FEL/FWL FWL

11. Field Name: Wildcat Field Number: 99999

12. Ground Elevation: 4921 13. County: WELD

14. GPS Data:

Date of Measurement: 10/01/2012 PDOP Reading: 1.4 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 1893 FSL 744 FWL _____ Bottom Hole: FNL/FSL 1200 FSL 660 FEL/FWL FEL
Sec: 5 Twp: 7N Rng: 60W Sec: 5 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: 230 ft

18. Distance to nearest property line: 250 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 2214 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	535-104	640	Section 5

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):

The lease is the south half of Sec 5-7N-60W

25. Distance to Nearest Mineral Lease Line: 250 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
CONDUCTOR	20	16	50	0	60	30	60	0
SURF	13+1/2	9+5/8	36	0	550	225	550	0
1ST	8+3/4	7	26	0	6,670	787	6,670	0
1ST LINER	6	4+1/2	11.6	5920	10,410			

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

33. Comments Continental Resources would like to move this location from the original location. The original location was 400' FSL and 700' FEL, SESE, Sec 5, 7N, 60W. The new location is 1970' FLS and 250' FWL, NWSW Sec 5, 7N, 60W.

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: Christi Scritchfield

Title: Regulatory Compliance Date: 1/8/2013 Email: christi.scritchfield@clr.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

05 123 35277 00

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
400351305	FORM 2 SUBMITTED
400368264	DIRECTIONAL DATA
400368335	LOCATION DRAWING
400368336	DEVIATED DRILLING PLAN
400368339	DIRECTIONAL DATA

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)