

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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Document Number:

400006222

Plugging Bond Surety

20030009

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

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: MARI CLARK Phone: (303)228-4413 Fax: (303)228-4286  
Email: mclark@nobleenergyinc.com

7. Well Name: GUTTERSEN STATE D Well Number: 16-33

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

9. Proposed Total Measured Depth: 7110

WELL LOCATION INFORMATION

10. QtrQtr: NWSW Sec: 16 Twp: 3N Rng: 64W Meridian: 6

Latitude: 40.222190 Longitude: -104.565520

Footage at Surface: 1480 FNL/FSL FSL 30 FEL/FWL FWL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 4752 13. County: WELD

14. GPS Data:

Date of Measurement: 04/29/2009 PDOP Reading: 2.4 Instrument Operator's Name: DAVID C HOLMES

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: 2795

18. Distance to nearest property line: 30 19. Distance to nearest well permitted/completed in the same formation: 816

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	160	GWA
NIOBRARA	NBRR	407-87	160	GWA

21. Mineral Ownership:  Fee  State  Federal  Indian Lease #: 70-7884-S

22. Surface Ownership:  Fee  State  Federal  Indian

23. Is the Surface Owner also the Mineral Owner?  Yes  No Surface Surety ID#: 20030012

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 Bon  \$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 - SEC. 16, T3N, R64W, 6TH PM

25. Distance to Nearest Mineral Lease Line: 30 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 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: \_\_\_\_\_

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	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bottom	Cement Top
SURF	12+1/4	8+5/8	24	600	252	600	0
1ST	7+7/8	4+1/2	11.6	7,110	638	7,110	

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

33. Comments **NO CONDUCTOR CASING WILL BE USED. WELL IS TO BE TWINNED WITH PROPOSED GUTTERSEN STATE D16-32D. CEMENT TOP FOR 1ST STRING WILL BE SET 200' ABOVE NIOBRARA. UNIT CONFIGURATION: E/2SE OF SECTION 17 & W/2SW/4 OF SECTION 16.**

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: MARI CLARK

Title: REGULATORY ANALYST II Date: \_\_\_\_\_ Email: mclark@nobleenergyinc.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: \_\_\_\_\_

<b>API NUMBER</b> 05	Permit Number: _____ Expiration Date: _____
<b>CONDITIONS OF APPROVAL, IF ANY:</b> _____	

### Attachment Check List

Att Doc Num	Name	Doc Description
400009858	WELL LOCATION PLAT	2415-Sharp-5001N_20091014_151435.pdf
400009860	30 DAY NOTICE LETTER	2415-Sharp-5001N_20091014_151451.pdf
400009861	EXCEPTION LOC REQUEST	2415-Sharp-5001N_20091014_151507.pdf
400009862	EXCEPTION LOC WAIVERS	2415-Sharp-5001N_20091014_151520.pdf
400009863	PROPOSED SPACING UNIT	2415-Sharp-5001N_20091014_151534.pdf

Total Attach: 5 Files