

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:

400011294

Plugging Bond Surety

20030009

3. Name of Operator: NOBLE ENERGY INC 4. COGCC Operator Number: 1003225. Address: 1625 BROADWAY STE 2200City: DENVER State: CO Zip: 802026. Contact Name: LINKA PAVELKA Phone: (303)228-4064 Fax: (303)228-4286Email: lpavelka@nobleenergyinc.com7. Well Name: DOGHEAD Well Number: 19-33D

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

9. Proposed Total Measured Depth: 10627

WELL LOCATION INFORMATION

10. QtrQtr: NESE Sec: 19 Twp: 7S Rng: 94W Meridian: 6Latitude: 39.421979 Longitude: -107.920649Footage at Surface: 1725 FNL/FSL FSL 333 FEL/FWL FEL11. Field Name: RULISON Field Number: 7540012. Ground Elevation: 8085 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 09/17/2008 PDOP Reading: 2.7 Instrument Operator's Name: RICHARD BULLEN15. 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 _____

1539 FSL 2093 FEL 1539 FSL 2093 FELSec: 19 Twp: 7S Rng: 94W Sec: 19 Twp: 7S Rng: 94W16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 1901 ft18. Distance to nearest property line: 327 ft 19. Distance to nearest well permitted/completed in the same formation: 303 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.)
ILES	ILES	139-73	40	NWSE
WILLIAMS FORK	WMFK	139-73	40	NWSE

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 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):
SEE ATTACHED

25. Distance to Nearest Mineral Lease Line: 110 ft 26. Total Acres in Lease: 249

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: EVAP.PIT

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
CONDUCTOR	20	16	LINE PIPE	120	15	120	0
SURF	12+1/4	8+5/8	24	2,500	545	2,500	0
1ST	7+7/8	4+1/2	11.6	10,617	520	10,617	

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

33. Comments THE PRODUCTION CASING TOP OF CEMENT WILL BE 200' ABOVE TOP OF GAS.
DOE WAS NOTIFIED 10/30/09 OF TIER 2 PROJECT RULISON SAP STATUS.

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: LINDA PAVELKA

Title: REGULATORY MANAGER Date: 11/2/2009 Email: lpavelka@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: _____

API NUMBER	Permit Number: _____	Expiration Date: _____
05	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	Doc Description
400012348	DEVIATED DRILLING PLAN	Doghead 19-33D- Drill Rep.pdf
400012350	OIL & GAS LEASE	_Pad 19I-Savage O&GLease sect. 19.pdf
400012351	SURFACE AGRMT/SURETY	_Pad 19I-Savage SUA.pdf
400012352	CORRESPONDENCE	Pad 19I Notify DOE.pdf
400012353	30 DAY NOTICE LETTER	Pad 19I- Notice 30 day letter.pdf
400012876	PLAT	Doghead 19-33D- Plat.pdf

Total Attach: 6 Files