

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:

400014030

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: LINDA PAVELKA Phone: (303)228-4064 Fax: (303)228-4286Email: lpavelka@nobleenergyinc.com7. Well Name: FEDERAL Well Number: 7-34C

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

9. Proposed Total Measured Depth: 7672

WELL LOCATION INFORMATION

10. QtrQtr: NESW Sec: 7 Twp: 8S Rng: 95W Meridian: 6Latitude: 39.375891 Longitude: -108.037705Footage at Surface: 1921 FNL/FSL FSL 3009 FEL/FWL FWL11. Field Name: RULISON Field Number: 7540012. Ground Elevation: 6502.6 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 07/24/2009 PDOP Reading: 2.3 Instrument Operator's Name: JOHN RICHARDSON15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**Footage at Top of Prod Zone: FNL/FSL 513 FSL 2151 FEL/FWL 489 FSL 2187 FEL/FWL FELSec: 7 Twp: 8S Rng: 95W Sec: 7 Twp: 8S Rng: 95W16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 4373 ft18. Distance to nearest property line: 320 ft 19. Distance to nearest well permitted/completed in the same formation: 328 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	139-51	40	SWSE
WILLIAMS FORK	WMFK	139-45	40	SWSE

21. Mineral Ownership: Fee State Federal Indian Lease #: COC23443

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):
T8S-R95W-SECTION 7: SWSE

25. Distance to Nearest Mineral Lease Line: 1062 26. Total Acres in Lease: 1248

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
CONDUCTOR	20	16	Line Pipe	60	15	60	0
SURF	12+1/4	8+5/8	24	1,500	425	1,500	0
1ST	7+7/8	4+1/2	11.6	7,662	550	7,672	

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

33. Comments The first string cement top will be 200' above TOG. This well is part of the SGV 7K pad. The Approved Federal APD and sundry for location change are attached.

34. Location ID: 334366

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: _____ 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
400015544	WELL LOCATION PLAT	Federal 7-34C well location plat.pdf
400015550	TOPO MAP	Federal 7-34C topographic map.pdf
400015552	DEVIATED DRILLING PLAN	Federal 7-34C deviated drilling plan.pdf
400015557	FED. SUNDRY NOTICE	FEDERAL 7-34C Sundry-Cond. Loc. Changed.pdf
400016182	FED. DRILLING PERMIT	Federal 7-34C approved Federal APD.pdf

Total Attach: 5 Files