

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:

400029923

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: Kate Shirley Phone: (303)228-4449 Fax: (303)228-4286
Email: kshirley@nobleenergyinc.com

7. Well Name: Wolfe CC Well Number: 18-27

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

9. Proposed Total Measured Depth: 6900

WELL LOCATION INFORMATION

10. QtrQtr: SESE Sec: 7 Twp: 4N Rng: 63W Meridian: 6

Latitude: 40.319950 Longitude: -104.475880

Footage at Surface: 180 FNL/FSL FSL 1350 FEL/FWL FEL

11. Field Name: Wattenberg Field Number: 90750

12. Ground Elevation: 4632 13. County: WELD

14. GPS Data:

Date of Measurement: 10/20/2009 PDOP Reading: 2.2 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: 180 ft

18. Distance to nearest property line: 180 ft 19. Distance to nearest well permitted/completed in the same formation: 775 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.)
Codell	CODL	407	160	see comments
Niobrara	NBRR	407	160	see comments

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):
Section 7-T4N-R63W: S/2, S/2S/2NE/4

25. Distance to Nearest Mineral Lease Line: 180 ft 26. Total Acres in Lease: 360

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: Closed Loop

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	500	210	500	0
1ST	7+7/8	4+1/2	11.6	6,900	615	6,900	

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

33. Comments No conductor casing will be used. First string top of cement is 200 feet above Niobrara. Unit configuration for both the Codell and Niobrara is Sec. 7: S/2SE/4 and Sec 18: N/2NE/4.

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: Kate Shirley

Title: Regulatory Specialist Date: _____ Email: kshirley@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
400030608	WELL LOCATION PLAT	WolfeCC18-27_Well Location Plat.pdf
400030611	30 DAY NOTICE LETTER	WolfeCC18-27_30DayNotice.pdf
400030613	SURFACE AGRMT/SURETY	WolfeCC18-27_SUA.pdf
400030614	PROPOSED SPACING UNIT	WolfeCC18-27_ProposedSpacing.pdf
400030620	EXCEPTION LOC REQUEST	WolfeCC18-27_ExceptionRequest.pdf
400030621	EXCEPTION LOC WAIVERS	WolfeCC18-27_ExceptionWaiver.pdf

Total Attach: 6 Files