

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:

400031468

Plugging Bond Surety

20030058

3. Name of Operator: EOG RESOURCES INC4. COGCC Operator Number: 277425. Address: 600 17TH ST STE 1100NCity: DENVER State: CO Zip: 802026. Contact Name: Nick Mathis Phone: (303)262-2894 Fax: (303)262-2895Email: Nick Mathis@eogresources.com7. Well Name: Randall Creek Well Number: 02-29H

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

9. Proposed Total Measured Depth: 12731

WELL LOCATION INFORMATION

10. QtrQtr: SESE Sec: 29 Twp: 12N Rng: 62W Meridian: 6Latitude: 40.974756 Longitude: -104.336578

FNL/FSL

FEL/FWL

Footage at Surface: 501 FSL 501 FEL11. Field Name: Wildcat Field Number: 9999912. Ground Elevation: 5348 13. County: WELD

14. GPS Data:

Date of Measurement: 01/14/2010 PDOP Reading: 1.2 Instrument Operator's Name: Unitah Engineering & Land Surveying15. 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
<u>886</u>	<u>FSL</u>	<u>805</u>	<u>600</u>	<u>FNL</u>	<u>600</u>
		<u>FEL</u>			<u>FWL</u>
Sec: <u>29</u>	Twp: <u>12N</u>	Rng: <u>62W</u>	Sec: <u>29</u>	Twp: <u>12N</u>	Rng: <u>62W</u>

16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 501 ft18. Distance to nearest property line: 501 ft 19. Distance to nearest well permitted/completed in the same formation: 8870 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	NA		NA

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 mineral lease description

25. Distance to Nearest Mineral Lease Line: _____ 501 _____ 26. Total Acres in Lease: _____ 4691 _____

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: Backfill and Cover

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+1/6			60		0	0
SURF	13+1/2	9+5/8	36	1,400	730	1,400	0
1ST	8+3/4	7	23	7,532	795	7,532	0
1ST LINER	6+1/4	4+1/2	11.6	12,731	650	12,731	6,682

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

33. Comments _____

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: Nick Mathis

Title: Regulatory Assistant Date: _____ Email: Nick_Mathis@eogresources.co

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: _____

Permit Number: _____ Expiration Date: _____

API NUMBER

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
400031479	DEVIATED DRILLING PLAN	Randall Creek 2-29H_APD directional plan.pdf
400031482	DEVIATED DRILLING PLAN	Randall Creek 2-29H_APD directional report.pdf
400031483	DRILLING PLAN	Randall Creek 2-29H_APD Drilling Plan.pdf
400031485	WELL LOCATION PLAT	Randall Creek 02-29H Well Location Plat.pdf
400031486	TOPO MAP	Randall Creek 02-29H Topo Map.pdf
400031487	LEGAL/LEASE DESCRIPTION	Randall Creek 2-29H Mineral Lease.pdf
400031752	LEGAL/LEASE DESCRIPTION	Randall Creek 2-29H Mineral Lease.pdf

Total Attach: 7 Files