

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:

400030021

Plugging Bond Surety

20030009

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: 18-29

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

9. Proposed Total Measured Depth: 6900

WELL LOCATION INFORMATION

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

Latitude: 40.320100 Longitude: -104.484440

Footage at Surface: 180 FNL/FSL 1457 FEL/FWL

11. Field Name: Wattenberg Field Number: 90750

12. Ground Elevation: 4630 13. County: WELD

14. GPS Data:

Date of Measurement: 10/20/2009 PDOP Reading: 2.0 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: 156 ft

18. Distance to nearest property line: 180 ft 19. Distance to nearest well permitted/completed in the same formation: 709 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: Section 7: S/2SW/4 Section 18: N/2NW/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

05

Permit Number: _____ Expiration Date: _____

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
400030458	WELL LOCATION PLAT	Wolfe CC 18-29 Well Location Plat.pdf
400030459	30 DAY NOTICE LETTER	Wolfe CC 18-29 30DayNotive.pdf
400030460	SURFACE AGRMT/SURETY	Wolfe CC 18-29 SUA.pdf
400030461	EXCEPTION LOC REQUEST	Wolfe CC 18-29 ExceptionRequest.pdf
400030462	EXCEPTION LOC WAIVERS	Wolfe CC 18-29 ExceptionWaiver.pdf
400030463	PROPOSED SPACING UNIT	Wolfe CC 18-29 ProposedSpacing.pdf

Total Attach: 6 Files