

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:
1757928
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: MARI CLARK Phone: (303)228-4413 Fax: (303)228-4286
Email: MCLARK@NOBLEENERGYINC.COM

7. Well Name: GARCIA K Well Number: 04-30D

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

9. Proposed Total Measured Depth: 7384

WELL LOCATION INFORMATION

10. QtrQtr: NENE Sec: 5 Twp: 4N Rng: 66W Meridian: 6
Latitude: 40.347260 Longitude: -104.795080

Footage at Surface: 614 FNL/FSL FNL 455 FEL/FWL FEL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 4699 13. County: WELD

14. GPS Data:

Date of Measurement: 04/07/2009 PDOP Reading: 1.4 Instrument Operator's Name: STEVEN A. LUND

15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL 100 FNL 100 FWL 100 FWL 100 FWL 100 FWL
Sec: 4 Twp: 4N Rng: 66W Sec: 4 Twp: 4N Rng: 66W

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: 400 ft

18. Distance to nearest property line: 455 ft 19. Distance to nearest well permitted/completed in the same formation: 791 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	407-87	160	GWA
NIOBRARA	NBRR	407-87	160	GWA

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):
5N, 66W SEC. 33: SW/4

25. Distance to Nearest Mineral Lease Line: 100 ft 26. Total Acres in Lease: 160

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
SURF	12+1/4	8+5/8	24	530	224	530	0
1ST	7+7/8	4+1/2	11.6	7,384	678	7,384	

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

33. Comments NO CONDUCTOR CASING WILL BE USED. WELL WILL BE TWINNED WITH EXISTING GARCIA 1-5 & PROPOSED GARCIA J33-33D.

34. Location ID: 326882

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: MARI CLARK

Title: REGULATORY ANALYST II Date: 7/22/2009 Email: MCLARK@NOBLEENERGYIN

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: David S. Neslin Director of COGCC Date: 9/29/2009

API NUMBER
05 123 30672 00

Permit Number: _____ Expiration Date: 9/28/2011

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.

1) Provide 24 hour notice of MIRU to Ed Binkley at 970-506-9834 or e-mail at ed.binkley@state.co.us 2) Comply with Rule 317.i and provide cement coverage from TD to a minimum of 200' above Niobrara and from 200' below Shannon to 200' above Shannon. Verify coverage with cement bond log. 3) Comply with Rule 321. Run and submit Directional Survey from TD to base of surface casing. Ensure that the wellbore complies with setback requirements in commission orders or rules prior to producing the well.

Null

SENSITIVE AREA DUE TO SHALLOW GROUNDWATER - LINED DRILLING PIT OR CLOSED LOOP SYSTEM REQUIRED

Attachment Check List

Att Doc Num	Name	Doc Description
1757938	WELL LOCATION PLAT	LF@2108446 1757938
1757939	SURFACE AGRMT/SURETY	LF@2108447 1757939
1757940	30 DAY NOTICE LETTER	LF@2108448 1757940
1757941	DEVIATED DRILLING PLAN	LF@2108449 1757941
1757942	EXCEPTION LOC REQUEST	LF@2108450 1757942
1757943	EXCEPTION LOC WAIVERS	LF@2108451 1757943
1757959	PROPOSED SPACING UNIT	LF@2113716 1757959
1769105	SURFACE CASING CHECK	LF@2123289 1769105
400009257	APD ORIG & 1 COPY	LF@2108478 400009257

Total Attach: 9 Files