

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:
1758510
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: MEEKS L Well Number: 30-22

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

9. Proposed Total Measured Depth: 7929

WELL LOCATION INFORMATION

10. QtrQtr: NESE Sec: 30 Twp: 3N Rng: 66W Meridian: 6
Latitude: 40.195020 Longitude: -104.814740

Footage at Surface: 2429 FNL/FSL FSL 1173 FEL/FWL FEL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 4858 13. County: WELD

14. GPS Data:

Date of Measurement: 04/09/2009 PDOP Reading: 1.9 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 _____ 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: 400 ft

18. Distance to nearest property line: 156 ft 19. Distance to nearest well permitted/completed in the same formation: 781 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
JSAND	JSND	232-23	320	E2
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):
SEC. 29: NW/4 & SEC. 30: E/2E/2, T3N, R66W

25. Distance to Nearest Mineral Lease Line: 156 ft 26. Total Acres in Lease: 320

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	7,929	758	7,929	

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

33. Comments NO CONDUCTOR CASING WILL BE USED. WELL WILL BE TWINNED WITH PROPOSED MEEKS PAD: MEEKS L030-21D & THE MEEKS L30-18D.

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: MARI CLARK

Title: REGULATORY ANALYST II Date: 8/19/2009 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: 11/13/2009

API NUMBER 05 123 30747 00	Permit Number: _____	Expiration Date: <u>11/12/2011</u>
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 Jim Precup at 303-469-1902 or e-mail at james.precup@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 Sussex to 200' above Sussex. Verify coverage with cement bond log.

Attachment Check List

Att Doc Num	Name	Doc Description
1289051	SURFACE AGRMT/SURETY	LF@2127265 1289051
1758530	WELL LOCATION PLAT	LF@2127356 1758530
1758531	LOCATION DRAWING	LF@2127357 1758531
1758532	SURFACE AGRMT/SURETY	LF@2127358 1758532
1758533	30 DAY NOTICE LETTER	LF@2127359 1758533
1758534	EXCEPTION LOC REQUEST	LF@2127360 1758534
1758535	PROPOSED SPACING UNIT	LF@2127361 1758535
1769132	SURFACE CASING CHECK	LF@2138457 1769132
400018818	APD ORIGINAL	LF@2127355 400018818

Total Attach: 9 Files