

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:
1691781
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: EILEEN ROBERTS Phone: (303)228-4330 Fax: (303)228-4286
Email: eroberts@nobleenergy.com

7. Well Name: PLUSS L Well Number: 11-20D

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

9. Proposed Total Measured Depth: 8056

WELL LOCATION INFORMATION

10. QtrQtr: SENW Sec: 11 Twp: 3N Rng: 66W Meridian: 6
Latitude: 40.241180 Longitude: -104.746850

Footage at Surface: 2011 FNL/FSL FNL 1953 FEL/FWL FWL

11. Field Name: WATTENBERG Field Number: 90750

12. Ground Elevation: 4896 13. County: WELD

14. GPS Data:

Date of Measurement: 05/11/2009 PDOP Reading: 2.7 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 2550 FNL 1320 FWL FWL Bottom Hole: FNL/FSL 2550 FNL 1320 FWL FWL
Sec: 11 Twp: 3N Rng: 66W Sec: 11 Twp: 3N 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: 173 ft

18. Distance to nearest property line: 616 ft 19. Distance to nearest well permitted/completed in the same formation: 736 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	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#: 20030012

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):
T3N-R66W SEC 11: NW/4

25. Distance to Nearest Mineral Lease Line: 80 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	600	215	600	0
1ST	7+7/8	4+1/2	11.6	8,056	526	8,056	

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

33. Comments NO CONDUCTOR CASING WILL BE USED. TWINNED PLUS L 11-06

34. Location ID: 327464

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: EILEEN ROBERTS

Title: REGULATORY ANALYST Date: 8/24/2009 Email: EROBERTS@NOBLEENERGY

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. Nashin Director of COGCC Date: 11/12/2009

API NUMBER
05 123 30753 00

Permit Number: _____ Expiration Date: 11/11/2011

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 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. 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.

Attachment Check List

Att Doc Num	Name	Doc Description
1691791	WELL LOCATION PLAT	LF@2130643 1691791
1691793	30 DAY NOTICE LETTER	LF@2130644 1691793
1691794	PROPOSED SPACING UNIT	LF@2130645 1691794
1691795	DEVIATED DRILLING PLAN	LF@2130646 1691795
1769151	SURFACE CASING CHECK	LF@2138458 1769151
400017444	APD ORIGINAL	LF@2130642 400017444

Total Attach: 6 Files