

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:

400059172

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: Susan Miller Phone: (303)228-4246 Fax: (303)228-4286

Email: susanmiller@nobleenergyinc.com

7. Well Name: RURAL LAND Well Number: G32-33D

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

9. Proposed Total Measured Depth: 8046

WELL LOCATION INFORMATION

10. QtrQtr: NWSW Sec: 32 Twp: 4N Rng: 65W Meridian: 6

Latitude: 40.266910 Longitude: -104.694040

Footage at Surface: 1903 FNL/FSL FSL 728 FEL/FWL FWL

11. Field Name: Hambert Field Number: 33530

12. Ground Elevation: 4922 13. County: WELD

14. GPS Data:

Date of Measurement: 12/02/2009 PDOP Reading: 2.1 Instrument Operator's Name: Daley Land Surveying

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
 1400 FSL 75 FWL 1400 FSL 75 FWL
 Sec: 32 Twp: 4N Rng: 65W 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: 460 ft

18. Distance to nearest property line: 667 ft 19. Distance to nearest well permitted/completed in the same formation: 840 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	See Comments
J Sand	JSND	232	160	See Comments
Niobrara	NBRR	407-87	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):
Township 4 North-Range 65 West, Section 32: SW/4

25. Distance to Nearest Mineral Lease Line: _____ 75 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	650	230	650	0
1ST	7+7/8	4+1/2	11.6	8,046	776	8,046	

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

33. Comments No conductor casing will be used. 1st string top of cement will be 200' above the Niobrara formation. 1 three-phase flowline will be installed from the wellhead to an existing facility located 250' southeast of the location. A form 4 with GPS and facility equipment for tank battery to follow. Unit Configuration: Township 4 North-Range 65 West, Section 32: W/2SW; Section 31: E/2SE.

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: Susan Miller

Title: Regulatory Analyst II Date: 6/1/2010 Email: smiller@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: _____

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
400059172	FORM 2 SUBMITTED	400059172.pdf
400066062	DEVIATED DRILLING PLAN	Directional Drilling Plan.pdf
400066063	WELL LOCATION PLAT	Loc Plat.pdf
400066089	OTHER	20 day Cert Letter.pdf
400066092	OTHER	20 Day Notification.pdf
400066093	OTHER	Ac Twinning Waiver Request Letter.pdf
400066095	WAIVERS	Twinning Waiver.pdf
400066471	30 DAY NOTICE LETTER	30 day notice.pdf

Total Attach: 8 Files