

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



DE	ET	OE	ES
----	----	----	----

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:
400126400
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: smiller@nobleenergyinc.com

7. Well Name: SATER Well Number: C24-79HN

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

9. Proposed Total Measured Depth: 11445

WELL LOCATION INFORMATION

10. QtrQtr: SESE Sec: 23 Twp: 4N Rng: 64W Meridian: 6

Latitude: 40.291730 Longitude: -104.509040

Footage at Surface: 375 feet ^{FNL/FSL} FSL 155 feet ^{FEL/FWL} FEL

11. Field Name: Wattenberg Field Number: 90750

12. Ground Elevation: 4675 13. County: WELD

14. GPS Data:

Date of Measurement: 11/08/2010 PDOP Reading: 2.1 Instrument Operator's Name: David Holmes

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

Footage at Top of Prod Zone: ^{FNL/FSL} 872 ^{FSL} FSL 77 ^{FWL} FWL ^{FNL/FSL} 150 ^{FSL} FSL 75 ^{FWL} FWL
Sec: 23 Twp: 4N Rng: 64W Sec: 13 Twp: 4N Rng: 64W

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: 1800 ft

18. Distance to nearest property line: 173 ft 19. Distance to nearest well permitted/completed in the same formation: 813 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.)
Niobrara	NBRR			

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):

25. Distance to Nearest Mineral Lease Line: _____ 26. Total Acres in Lease: _____

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 28 or 29 are yes, is this location in a sensitive area (Rule 901.e)? Yes No

31. Mud disposal: Offsite Onsite **If 28, 29, or 30 are "Yes" a pit permit may be required.**

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	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
CONDUCTOR	18+1/2	16			100	6	100	0
SURF	12+1/4	9+5/8	36		600	230	600	0
1ST	8+3/4	7	26		6,917	655	6,917	
1ST LINER	6+1/8	4+1/2	11.6	5704	11,445		11,445	

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

33. Comments This well is part of a 4-well pad (Sater C24-79HN, Sater C25-69HN, Sater C25-79HN, Sater C26-69HN) which will include production equipment on location. Production liner will be hung off of inside 7" casing. Noble Energy Inc certifies that the lease(s) shall be committed to the unit.

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: _____ 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: _____

API NUMBER	Permit Number: _____	Expiration Date: _____
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
400132116	30 DAY NOTICE LETTER
400132117	WELL LOCATION PLAT
400132118	DEVIATED DRILLING PLAN
400132119	PROPOSED SPACING UNIT
400132120	EXCEPTION LOC WAIVERS

Total Attach: 5 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)

BMP

<u>Type</u>	<u>Comment</u>

Total: 0 comment(s)