

APPLICATION FOR PERMIT TO:

1. Drill, Deepen, Re-enter, **Recomplete and Operate**

2. TYPE OF WELL
 OIL GAS COALBED OTHER _____
 SINGLE ZONE MULTIPLE COMMINGLE
 Refiling
 Sidetrack

Document Number:
 400175792
 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: Andrea Rawson Phone: (303)228-4253 Fax: (303)228-4286
 Email: arawson@nobleenergyinc.com
 7. Well Name: Wade Well Number: 02-29
 8. Unit Name (if appl): _____ Unit Number: _____
 9. Proposed Total Measured Depth: 6853

WELL LOCATION INFORMATION

10. QtrQtr: NWNE Sec: 29 Twp: 8N Rng: 59W Meridian: 6
 Latitude: 40.639220 Longitude: -103.996950
 Footage at Surface: 425 feet FNL/FSL FNL 1350 feet FEL/FWL FEL
 11. Field Name: Pommel West Field Number: 69765
 12. Ground Elevation: 4868 13. County: WELD

14. GPS Data:
 Date of Measurement: 05/10/2006 PDOP Reading: 3.0 Instrument Operator's Name: Paul Tappy

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: 200 ft
 18. Distance to nearest property line: 425 ft 19. Distance to nearest well permitted/completed in the same formation: 1650 ft

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	407-87	40	NWNE

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 Bond \$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):

NE/4 Section 29 Township 8 North, Range 59W

25. Distance to Nearest Mineral Lease Line: 425 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 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: _____

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
SURF	12+1/4	8+5/8	24	0	417	295	417	0
1ST	7+7/8	5+1/2	15.5	0	6,852	200	6,852	5,300

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

33. Comments A Form 2A is not required for this recompletion because no pit will be constructed and there will be no additional surface disturbance beyond the originally disturbed area.

34. Location ID: 330957

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: Andrea Rawson

Title: Regulatory specialist Date: _____ Email: arawson@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

05 123 19932 00

Permit Number: _____ Expiration Date: _____

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
400179756	SURFACE AGRMT/SURETY

Total Attach: 1 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)