

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:
400049863
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: JAN KAJIWARA Phone: (303)228-4092 Fax: (303)228-4280
Email: jkajiwara@nobleenergyinc.com

7. Well Name: WELLS RANCH AE Well Number: 30-08

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

9. Proposed Total Measured Depth: 6900

WELL LOCATION INFORMATION

10. QtrQtr: SENE Sec: 30 Twp: 6N Rng: 62W Meridian: 6

Latitude: 40.459420 Longitude: -104.358100

Footage at Surface: 2008 FNL/FSL FNL 497 FEL/FWL FEL

11. Field Name: Wattenberg Field Number: 90750

12. Ground Elevation: 4760 13. County: WELD

14. GPS Data:

Date of Measurement: 02/15/2010 PDOP Reading: 1.6 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: 5280 mi

18. Distance to nearest property line: 497 ft 19. Distance to nearest well permitted/completed in the same formation: 1305 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		80	E/2NE4
NIOBRARA	NBRR		80	E/2NE4

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):
T6N-R62W Section 30: N/2, SW/4

25. Distance to Nearest Mineral Lease Line: 497 ft 26. Total Acres in Lease: 478

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: closed loop system

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	550	225	550	0
1ST	7+7/8	4+1/2	11.6	6,900	615	6,900	

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

33. Comments NO CONDUCTOR CASING WILL BE USED. TOC=200' ABOVE THE NIOBRARA.

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: JAN KAJIWARA

Title: Regulatory Analyst Date: 4/1/2010 Email: jkajiwara@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: David S. Nashin Director of COGCC Date: 5/10/2010

API NUMBER
05 123 31572 00

Permit Number: _____ Expiration Date: 5/9/2012

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.

COGCC ENG COA – SME 1) Provide `24 hr notice of spud to to Bo Brown at 970-330-6085 or email at bo.brown@state.co.us. 2) Note surface casing setting depth change from 500' to 550'. Increase cement coverage accordingly. Set surface casing per Rule 317d, cement to surface. 3) If completed, provide cement coverage from TD to a minimum of 200' above Niobrara. Verify coverage with cement bond log. 4) If dry hole, 40 sks cement 50' above Niobrara top, 50 sks cement ½ out, ½ in surface casing, 10 sks cement top of surface casing, cut 4' below GL, weld on plate, 5 sks cement in rat hole & 5 sks cement in mouse hole. Restore surface location.

Attachment Check List

Att Doc Num	Name	Doc Description
1725807	SURFACE CASING CHECK	LF@2462186 1725807
400051656	30 DAY NOTICE LETTER	LF@2451538 400051656
400051661	WELL LOCATION PLAT	LF@2451539 400051661
400051663	SURFACE AGRMT/SURETY	LF@2451540 400051663
400053526	FORM 2 SUBMITTED	LF@2451541 400053526

Total Attach: 5 Files