

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:

2094758

Plugging Bond Surety

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: BLACK RAVEN ENERGY INC 4. COGCC Operator Number: 10203

5. Address: 1125 17TH ST STE 2300  
City: DENVER State: CO Zip: 80202

6. Contact Name: JANICE ALDSTADT Phone: (303)308-1330X1 Fax: (303)308-1590  
Email: JALDSTADT@BLACKRAVENENERGY.COM

7. Well Name: BRINKEMA Well Number: 843-3-12-L12

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

9. Proposed Total Measured Depth: 3000

WELL LOCATION INFORMATION

10. QtrQtr: SWNW Sec: 3 Twp: 8N Rng: 43W Meridian: 6

Latitude: 40.694800 Longitude: -102.140020

Footage at Surface: 3140 FSL 1240 FWL

11. Field Name: WILDCAT Field Number: 99999

12. Ground Elevation: 3662 13. County: PHILLIPS

14. GPS Data:

Date of Measurement: 01/12/2008 PDOP Reading: 3.0 Instrument Operator's Name: NEAL E. MCCORMICK

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: 150 ft

18. Distance to nearest property line: 500 ft 19. Distance to nearest well permitted/completed in the same formation: 2513 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):  
 T8N R3W SEC: 3 LOTS 1-12 ALSO KNOWN AS LOTS 1,2, 3 AND 4 AND N1/2

25. Distance to Nearest Mineral Lease Line: 500 ft 26. Total Acres in Lease: 535

### 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: EVAP. & BURIAL

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	9+7/8	7	17	450	180	450	0
1ST	6+1/4	4+1/2	10.5	3,000	80	3,000	1,900

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

33. Comments **NO CONDUCTOR CASING WILL BE USED. THE PERFORATED INTERVAL IS ESTIMATED TO BE SHALLOWER THAN 2500'. NOTHING ON SURFACE HAS CHANGED SINCE ORIGINAL APD WAS SUBMITTED AND APPROVED UNDER API #05-095-06215-00.**

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: JANICE ALDSTADT

Title: LANDMAN Date: \_\_\_\_\_ Email: JALDSTADT@BLACKRAVENE

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: \_\_\_\_\_

<b>API NUMBER</b> 05 095 06215 00	Permit Number: _____ Expiration Date: _____
<b>CONDITIONS OF APPROVAL, IF ANY:</b> _____	

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
2094758	APD ORIGINAL	LF@2217084 2094758
2094760	WELL LOCATION PLAT	LF@2217085 2094760
2094761	30 DAY NOTICE LETTER	LF@2217086 2094761

Total Attach: 3 Files