

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:
1759085
Plugging Bond Surety
20090081

3. Name of Operator: ENERPLUS RESOURCES (USA) CORPORATION 4. COGCC Operator Number: 10177

5. Address: 1700 LINCOLN ST STE 1300
City: DENVER State: CO Zip: 80203

6. Contact Name: MEGHAN CALENZO Phone: (720)279-5500 Fax: (720)279-5550
Email: MCALENZO@ENERPLUS.COM

7. Well Name: BLACH Well Number: 4-54-9-33

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

9. Proposed Total Measured Depth: 5100

WELL LOCATION INFORMATION

10. QtrQtr: SWSW Sec: 9 Twp: 4N Rng: 54W Meridian: 6
Latitude: 40.322650 Longitude: -103.431180

Footage at Surface: 660 FNL/FSL FSL 660 FEL/FWL FWL

11. Field Name: WILDCAT Field Number: 99999

12. Ground Elevation: 4309 13. County: WASHINGTON

14. GPS Data:

Date of Measurement: 09/02/2009 PDOP Reading: 2.3 Instrument Operator's Name: DARREN VEAL

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: 5723 ft

18. Distance to nearest property line: 660 ft 19. Distance to nearest well permitted/completed in the same formation: 5888 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.)
J SAND	JSND			

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):
SEE ATTACHED PAGE 2

25. Distance to Nearest Mineral Lease Line: 660 ft 26. Total Acres in Lease: 8624

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: CUTTINGS BURIED IN PLA

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	H40 17#	450	105	450	0
1ST	6+1/4	4+1/2	J55 10.5	5,100	75		4,300

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

33. Comments NO CONDUCTOR CASING WILL BE SET.

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: MEGHAN E. CALENZO

Title: ENGINEERING Date: 9/14/2009 Email: MCALENZO@ENERPLUS.CO

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: 11/13/2009

API NUMBER
05 121 10995 00

Permit Number: _____ Expiration Date: 11/12/2011

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.

1) Provide 24 hour notice of MIRU to Colby Horton at 970-467-2517 or Colby.horton@state.co.us. 2) If completed, provide cement coverage from TD to a minimum of 200' above D Sand. Verify coverage with cement bond log. 3) If dry hole, set 60 sks cement from 50' below D Sand base to 100' above D Sand top, 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
1691956	CORRESPONDENCE	LF@2155825 1691956
1692257	30 DAY NOTICE LETTER	LF@2160160 1692257
1759086	LEGAL/LEASE DESCRIPTION	LF@2142453 1759086
1759087	WELL LOCATION PLAT	LF@2142454 1759087
1759088	30 DAY NOTICE LETTER	LF@2142455 1759088
1940967	SURFACE CASING CHECK	LF@2164314 1940967
400019025	APD ORIGINAL	LF@2142452 400019025

Total Attach: 7 Files