



APPLICATION FOR PERMIT TO:

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

2. TYPE OF WELL

OIL ☐ GAS ☐ COALBED ☐ OTHER ☐ Water Disposal Well
SINGLE ZONE ☒ MULTIPLE ZONE ☐ COMMINGLE ZONE ☐

Refiling ☐
Sidetrack ☐

Document Number:

400142360

Plugging Bond Surety

20060159

3. Name of Operator: BLACK RAVEN ENERGY INC 4. COGCC Operator Number: 10203

5. Address: 1331 17TH STREET - #350

City: DENVER State: CO Zip: 80202

6. Contact Name: Janice Aldstadt Phone: (303)308-1330 Fax: (303)308-1590

Email: jaldstadt@blackravenenergy.com

7. Well Name: Roll SWD Well Number: 843-18-21

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

9. Proposed Total Measured Depth: 3900

WELL LOCATION INFORMATION

10. QtrQtr: NENW Sec: 18 Twp: 8N Rng: 43W Meridian: 6

Latitude: 40.670900 Longitude: -102.194600

Footage at Surface: 350 feet FNL/FSL FNL 2499 feet FEL/FWL FWL

11. Field Name: Unnamed Field Number: 85251

12. Ground Elevation: 3702 13. County: PHILLIPS

14. GPS Data:

Date of Measurement: 03/09/2011 PDOP Reading: 2.2 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: 350 ft

18. Distance to nearest property line: 239 ft 19. Distance to nearest well permitted/completed in the same formation: 2070 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.)
D Sand	DSND			
Dakota	DKTA			
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):
 Lots 1, 2, and 3-Sec. 6; SW/4-Sec. 7; S/2-Sec. 17; NW/4, SW/4-Sec. 18; NW/4-Sec. 19..T8N-R43W and NE/4-Sec. 24,T8N-R44W

25. Distance to Nearest Mineral Lease Line: 239 ft 26. Total Acres in Lease: 1276

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

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	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
SURF	12+1/4	8+5/8	24#	0	450	200	450	0
1ST	7+7/8	5+1/2	15.5 #	0	3,400	250	3,400	1,600

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

33. Comments No conductor casing will be used. This well to be used to inject Niobrara Formation produced water into the Lower Cretaceous sands (D-Sand, J-Sand, Dakota Sands) at a depth of approximately 3,900 feet below the surface.

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: 3/28/2011 Email: jaldstadt@blackravenenergy.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: _____ Director of COGCC Date: _____

API NUMBER

05

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.

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Attachment Check List

Att Doc Num	Name
400142360	FORM 2 SUBMITTED
400144035	PLAT
400144036	TOPO MAP
400144037	OTHER
400148002	SURFACE AGRMT/SURETY

Total Attach: 5 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)

BMP

Type	Comment

Total: 0 comment(s)