

FORM 5A Rev 02/08	State of Colorado Oil and Gas Conservation Commission 1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">DE</td> <td style="width:25%;">ET</td> <td style="width:25%;">OE</td> <td style="width:25%;">ES</td> </tr> </table>	DE	ET	OE	ES
DE	ET	OE	ES				
COMPLETED INTERVAL REPORT			Document Number: <div style="text-align: center; border: 1px solid black; padding: 5px;"> 400164858 </div>				

1. OGCC Operator Number: <u>10203</u> 2. Name of Operator: <u>BLACK RAVEN ENERGY INC</u> 3. Address: <u>1331 17TH STREET - #350</u> City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	4. Contact Name: <u>Madeleine Lariviere</u> Phone: <u>(303) 308-1330</u> Fax: <u>(303) 308-1590</u>
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5. API Number <u>05-095-06240-00</u> 7. Well Name: <u>SAND PARTNERS</u> 8. Location: QtrQtr: <u>NWNE</u> Section: <u>12</u> Township: <u>8N</u> Range: <u>44W</u> Meridian: <u>6</u> 9. Field Name: <u>AMHERST</u> Field Code: <u>2480</u>	6. County: <u>PHILLIPS</u> Well Number: <u>844-12-31</u>
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Completed Interval

FORMATION: <u>NIOBRARA</u>	Status: <u>PRODUCING</u>
Treatment Date: <u>04/07/2011</u>	Date of First Production this formation: <u>04/17/2011</u>
Perforations Top: <u>2448</u> Bottom: <u>2462</u>	No. Holes: <u>52</u> Hole size: <u>6 + 1/4</u>
Provide a brief summary of the formation treatment:	
Frac Niobrara with Maverick Stimulation using 28 # crosslinked gel 50,040 #16/30 Daniels sand and 50,000 # 12/20 Daniels sand for a total of 100,040 # sand. 60.14 tons CO2. 537 BLWTR. 5 MIN- 659 PSI 10 MIN-651 PSI. 15 MIN -646 PSI . MAX RATE 13.6 AVG RATE 7.1 MAX PSI- 1394 AVG PSI 765 isip-697 psi	

This formation is commingled with another formation: Yes No

Test Information:

Date: <u>05/01/2011</u>	Hours: <u>24</u>	Bbls oil: <u>0</u>	Mcf Gas: <u>114</u>	Bbls H2O: <u>0</u>
Calculated 24 hour rate:	Bbls oil: <u>0</u>	Mcf Gas: <u>114</u>	Bbls H2O: <u>0</u>	GOR: _____
Test Method: <u>Flow Test</u>	Casing PSI: <u>90</u>	Tubing PSI: <u>0</u>	Choke Size: <u>48/64</u>	
Gas Disposition: <u>SOLD</u>	Gas Type: <u>DRY</u>	BTU Gas: <u>966</u>	API Gravity Oil: <u>0</u>	
Tubing Size: <u>2 + 3/8</u>	Tubing Setting Depth: <u>2433</u>	Tbg setting date: <u>05/31/2011</u>	Packer Depth: _____	

Reason for Non-Production:

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____

Bridge Plug Depth: _____ Sacks cement on top: _____

Comment:

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: Madeleine Lariviere

Title: Office Manager Date: 6/2/2011 Email mlariviere@blackravenenergy.com
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Attachment Check List

Att Doc Num	Name
400164858	FORM 5A SUBMITTED
400171150	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	rec btu info	7/20/2011 9:54:30 AM
Permit	REQ BTU GAS	7/19/2011 3:25:35 PM

Total: 2 comment(s)