

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:

1791291

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 DIAMOND MINERALS LLC

4. COGCC Operator Number: 10244

5. Address: 1600 STOUT ST STE 1350

City: DENVER State: CO Zip: 80202

6. Contact Name: ROB VINCENT Phone: (303)973-3228 Fax: (303)346-4893

Email: RVINCENT@BDMINERALS.COM

7. Well Name: TPR Well Number: 111-6

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

9. Proposed Total Measured Depth: 10830

WELL LOCATION INFORMATION

10. QtrQtr: SWSE Sec: 25 Twp: 7S Rng: 94W Meridian: 6

Latitude: 39.404400 Longitude: -107.832644

Footage at Surface: 616 FNL/FSL FSL 1893 FEL/FWL FEL

11. Field Name: WILDCAT Field Number: 99999

12. Ground Elevation: 9129 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 08/04/2008 PDOP Reading: 3.7 Instrument Operator's Name: B. JOHNSON

15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL FNL 1261 FNL 732 FWL 732 FWL 1261 FNL 732 FWL 732
Bottom Hole: FNL/FSL FNL 1261 FNL 732 FWL 732 FWL 1261 FNL 732 FWL 732
Sec: 6 Twp: 8S Rng: 93W Sec: 6 Twp: 8S Rng: 93W

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: 2486 ft

18. Distance to nearest property line: 2486 ft 19. Distance to nearest well permitted/completed in the same formation: 1734 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.)
WILLIAMS FORK	WMFK	139-90		

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):
 ATTACHED TO ORIGINAL APD (FORM 2) SUBMITTED 5/5/08, APPROVED 8/13/08.

25. Distance to Nearest Mineral Lease Line: 2592 ft 26. Total Acres in Lease: 1664

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: _____

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
CONDUCTOR	24	20		140	10	140	0
SURF	14+3/4	9+5/8	32.3	1,500		2,100	0
1ST	7+7/8	4+1/2	11.6	10,830		10,830	

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

33. Comments TPR Well Pad 25A has been constructed and no further surface disturbance will be necessary to drill, complete and produce this well. Conductor pipe has already been set.

34. Location ID: 334457

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: ROB VINCENT

Title: VP OF OPERATIONS Date: 11/6/2009 Email: RVINCENT@BDMINERALS.C

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. Nash Director of COGCC Date: 12/30/2009

API NUMBER: **05 045 16948 00** Permit Number: _____ Expiration Date: 12/29/2010

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.

24-HOUR SPUD NOTICE REQUIRED. E-MAIL david.Andrews@state.co.us GARFIELD COUNTY RULISON-FIELD NOTICE TO OPERATORS. NOTE: ALL NOTICES SHALL BE GIVEN VIA E-MAIL. SEE ATTACHED NOTICE. CEMENT-TOP VERIFICATION BY CBL REQUIRED. THE MOISTURE CONTENT OF ANY DRILL CUTTINGS IN A CUTTINGS PIT, TRENCH, OR PILE SHALL BE AS LOW AS PRACTICABLE TO PREVENT ACCUMULATION OF LIQUIDS GREATER THAN DE-MINIMIS AMOUNTS. AT THE TIME OF CLOSURE, THE DRILL CUTTINGS MUST ALSO MEET THE APPLICABLE STANDARDS OF TABLE 910-1. THE PROPOSED SURFACE CASING IS MORE THAN 50' BELOW THE DEPTH OF THE DEEPEST WATER WELL WITHIN 1-MILE OF THE SURFACE LOCATION WHEN CORRECTED FOR ELEVATION DIFFERENCES. THE DEEPEST WATER WELL WITHIN 1-MILE IS 00 FEET DEEP.

Attachment Check List

Att Doc Num	Name	Doc Description
1791291	APD ORIGINAL	LF@2176692 1791291
400014168	FORM 2 SUBMITTED	LF@2180017 400014168

Total Attach: 2 Files