

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:

400154487

Plugging Bond Surety

20060159

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: 1331 17TH STREET - #350  
City: DENVER State: CO Zip: 80202

6. Contact Name: Madeleine Lariviere Phone: (303)308-1330 Fax: (303)308-1590  
Email: mlariviere@blackravenenergy.com

7. Well Name: Claymon Well Number: 843-6-12-L12

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

9. Proposed Total Measured Depth: 3000

WELL LOCATION INFORMATION

10. QtrQtr: Lot 12 Sec: 6 Twp: 8N Rng: 43W Meridian: 6  
Latitude: 40.694940 Longitude: -102.200450

Footage at Surface: 3608 feet FNL 546 feet FWL

11. Field Name: Unnamed Field Number: 85251

12. Ground Elevation: 3713 13. County: PHILLIPS

14. GPS Data:

Date of Measurement: 03/30/2011 PDOP Reading: 2.1 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: 546 ft

18. Distance to nearest property line: 546 ft 19. Distance to nearest well permitted/completed in the same formation: 1242 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):  
 Lot 4, NW/4 and E/2, Sec. 6 T8N-R43W; W/2, Sec. 30 T9N-R43W

25. Distance to Nearest Mineral Lease Line: 546 ft 26. Total Acres in Lease: 855

### 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 **If 28, 29, or 30 are "Yes" a pit permit may be required.**

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	9+7/8	7+0/0	17#	12	450	180	450	0
1ST	6+1/4	4+1/2	10.5#	12	3,000	80	3,000	1,600

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 ft.

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: Madeleine Lariviere

Title: Office Manager Date: 4/18/2011 Email: mlariviere@blackravenenergy.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. Neslin Director of COGCC Date: 5/10/2011

<b>API NUMBER</b>
05 095 06309 00

Permit Number: \_\_\_\_\_ Expiration Date: 5/9/2013

**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 hr notice of spud to Colby Horton at 970-467-2517 or colby.horton@state.co.us.
2. Set surface casing per Rule 317d, cement to surface. Setting surface casing less than the approved depth is a permit violation unless prior written approval is obtained from the COGCC.
3. If completed, provide cement coverage from TD to 200' above Niobrara. Verify coverage with cement bond log.
4. If well is a dry hole set the following plugs: a) 35 sks cement from 50' above Niobrara top up, b) 35 sks cement ½ out, ½ in surface casing c) 10 sks cement at top of surface casing, cut casing 4' below GL, weld on plate, 5 sks cement in rathole and 5 sks cement in mouse hole. Restore surface location.

Well cannot be completed at depths 2500' or deeper.

### Attachment Check List

Att Doc Num	Name
400154487	FORM 2 SUBMITTED
400154516	WELL LOCATION PLAT
400154518	TOPO MAP

Total Attach: 3 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)

### BMP

<u>Type</u>	<u>Comment</u>

Total: 0 comment(s)