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| 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; font-weight: bold;">400170638</div> | | | | |
| The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion. | | | | | | | |

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|--|---|
| 1. OGCC Operator Number: <u>10203</u> | 4. Contact Name: <u>Madeleine Lariviere</u> |
| 2. Name of Operator: <u>BLACK RAVEN ENERGY INC</u> | Phone: <u>(303) 308-1330</u> |
| 3. Address: <u>1331 17TH STREET - #350</u> | Fax: <u>(303) 308-1590</u> |
| City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u> | |

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|--|---------------------------------|
| 5. API Number <u>05-095-06305-00</u> | 6. County: <u>PHILLIPS</u> |
| 7. Well Name: <u>Vieselmeyer</u> | Well Number: <u>843-5-42-L9</u> |
| 8. Location: QtrQtr: <u>Lot 9</u> Section: <u>5</u> Township: <u>8N</u> Range: <u>43W</u> Meridian: <u>6</u> | |
| 9. Field Name: <u>AMHERST</u> Field Code: <u>2480</u> | |

Completed Interval

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|---|--|
| FORMATION: <u>NIOBRARA</u> | Status: <u>PRODUCING</u> |
| Treatment Date: <u>03/25/2011</u> | Date of First Production this formation: <u>04/13/2011</u> |
| Perforations Top: <u>2400</u> Bottom: <u>2420</u> | No. Holes: <u>80</u> Hole size: <u>6 + 1/4</u> |
| Provide a brief summary of the formation treatment: | Open Hole: <input type="checkbox"/> |

Frac Niobrara with Maverick Stimulation using 28 # crosslinked gel 50,000 #16/30 Arizona sand and 50,020 # 12/20 Texas gold sand for a total of 100,020 # sand. 60.02 tons CO2. 514 BLWTR. 5 MIN- 745 PSI 10 MIN-734 PSI. 15 MIN -731 PSI . MAX RATE 13.7 AVG RATE 9.6 MAX PSI-1020 AVG PSI 804 isip-795 psi

This formation is commingled with another formation: Yes No

Test Information:

| | | | | |
|-------------------------------|-----------------------------------|-------------------------------------|---------------------------|--------------------|
| Date: <u>04/23/2011</u> | Hours: <u>24</u> | Bbls oil: <u>0</u> | Mcf Gas: <u>297</u> | Bbls H2O: <u>0</u> |
| Calculated 24 hour rate: | Bbls oil: <u>0</u> | Mcf Gas: <u>297</u> | Bbls H2O: <u>0</u> | GOR: _____ |
| Test Method: <u>Flow Test</u> | Casing PSI: <u>175</u> | Tubing PSI: <u>0</u> | Choke Size: <u>28/64</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>2286</u> | Tbg setting date: <u>06/08/2011</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: 6/9/2011 Email mlariviere@blackravenenergy.com
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Attachment Check List

| Att Doc Num | Name |
|-------------|-------------------|
| 400170638 | FORM 5A SUBMITTED |
| 400173477 | WELLBORE DIAGRAM |

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)