

APPLICATION FOR PERMIT TO:

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

2. TYPE OF WELL
 OIL GAS COALBED OTHER _____
 SINGLE ZONE MULTIPLE COMMINGLE

Refiling
 Sidetrack

Document Number:
 400218938
 PluggingBond SuretyID
 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: Scott Ritger Phone: (303)887-9266 Fax: (303)308-1590
 Email: sritger@ticdenver.com
 7. Well Name: AJU Glenn Well Number: F-2
 8. Unit Name (if appl): _____ Unit Number: _____
 9. Proposed Total Measured Depth: 5598

WELL LOCATION INFORMATION

10. QtrQtr: SESE Sec: 6 Twp: 1N Rng: 57W Meridian: 6
 Latitude: 40.074122 Longitude: -103.793770
 Footage at Surface: 330 feet FNL/FSL 330 feet FEL/FWL FEL
 11. Field Name: Adena Field Number: 700
 12. Ground Elevation: 4499 13. County: MORGAN

14. GPS Data:
 Date of Measurement: 10/06/2011 PDOP Reading: 4.5 Instrument Operator's Name: Theresa McCollom

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: 180 ft
 18. Distance to nearest property line: 330 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 1283 ft

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	DSAND	26	40	SESE Section 6

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#: 20110164
 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 Bond \$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):

S2SE4 of Section 6, T1N R57W, 6th Prime Meridian

25. Distance to Nearest Mineral Lease Line: 330 ft 26. Total Acres in Lease: 80

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: No drilling mud will be used

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	10+3/4	8+5/8		0	185	150	185	
1ST	7+5/8	5+1/2	15.5	0	5,629	150	5,629	

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

33. Comments Nearest above ground utility (180' from wellhead) is an electrical transmission line that runs along the north side of County Road F. Nearest property line (330' from wellhead) is the northern boundary of section 7, T1N R57W. Closest well in the same formation (1283') is the Harry Geyer #B-2.

34. Location ID: 313740

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: Scott Ritger

Title: Geologist Date: _____ Email: sritger@ticdenver.com

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

05 087 05412 00

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.

Attachment Check List

Att Doc Num	Name

Total Attach: 0 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)