

FORM
2

Rev
12/05

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

400356097

Date Received:

12/14/2012

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

PluggingBond SuretyID

3. Name of Operator: BLACK HILLS PLATEAU PRODUCTION LLC 4. COGCC Operator Number: 10150

5. Address: 1515 WYNKOOP ST STE 500
City: DENVER State: CO Zip: 80202

6. Contact Name: Jessica Donahue Phone: (720)210-1333 Fax: (303)566-3344
Email: Jessica.Donahue@blackhillscorp.com

7. Well Name: Homer Deep Unit Well Number: 9-11BH

8. Unit Name (if appl): Homer Deep Unit Unit Number: COC72921X

9. Proposed Total Measured Depth: 16920

WELL LOCATION INFORMATION

10. QtrQtr: NENE Sec: 9 Twp: 8S Rng: 98W Meridian: 6

Latitude: 39.380250 Longitude: -108.339620

Footage at Surface: 297 feet FNL 392 feet FWL
FNL/FSL FEL/FWL

11. Field Name: South Shale Ridge Field Number: 77760

12. Ground Elevation: 5525 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 11/20/2012 PDOP Reading: 1.8 Instrument Operator's Name: Aaron Grosch

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

Footage at Top of Prod Zone: 1109 FNL 596 FWL 1801 FSL 711 FWL
Bottom Hole: 1801 FSL 711 FWL
Sec: 9 Twp: 8S Rng: 98W Sec: 15 Twp: 8S Rng: 98W

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: 369 ft

18. Distance to nearest property line: 297 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 1348 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.)
Frontier	FRTR			
Mancos	MNCS			
Mesaverde	MVRD			
Mowry	MWRY			
Sego	SEGO			

21. Mineral Ownership: Fee State Federal Indian Lease #: COC012733

A

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 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):
 T8S R98W: S2SW Sect. 3; SENE, SESW, NESE Sect. 6; Lots 1-3, 5-7 Sect. 6; NENE Sect. 8; NENE, W2, SE Sect. 9; N2NW, NWSW, S2SW Sect. 10

25. Distance to Nearest Mineral Lease Line: 297 ft 26. Total Acres in Lease: 1198

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: _____

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
CONDUCTOR	24	20		0	80		80	0
SURF	17+1/2	13+3/8	54.5	0	560	300	560	0
1ST	12+1/4	9+5/8	40	0	5,450	1,405	5,450	200
2ND	6+1/8	4+1/2	11.6	0	16,920	662	16,920	7,009
1ST LINER	8+3/4	7	23	5250	7,590	305	7,590	5,250

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

33. Comments _____

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: Jessica Donahue

Title: Regulatory Technician Date: 12/14/2012 Email: Jessica.

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	Permit Number: _____	Expiration Date: _____
05	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.

Data retrieval failed for the subreport 'IntPolicy_NTO' located at: W:\inetpub\Net\Reports\policy_nto.rdl. Please check th

Attachment Check List

Att Doc Num	Name
400356097	FORM 2 SUBMITTED
400358341	DRILLING PLAN
400358342	FED. DRILLING PERMIT
400358343	WELL LOCATION PLAT
400358359	MULTI-WELL PLAN
400358360	DEVIATED DRILLING PLAN
400358376	DIRECTIONAL DATA
400358378	LOCATION DRAWING
400358379	CONST. LAYOUT DRAWINGS
400358380	LOCATION PICTURES

Total Attach: 10 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)