

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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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 ☐

Document Number:

1790677

Plugging Bond Surety

3. Name of Operator: DELTA PETROLEUM CORPORATION 4. COGCC Operator Number: 168005. Address: 370 17TH ST STE 4300City: DENVER State: CO Zip: 802026. Contact Name: MIKE STANLEY Phone: (303)820-4024 Fax: (303)820-4025Email: CJOHNSON@DELTAPETRO.COM7. Well Name: NVEGA Well Number: 22-434

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

9. Proposed Total Measured Depth: 8402

WELL LOCATION INFORMATION

10. QtrQtr: NESE Sec: 22 Twp: 9S Rng: 93W Meridian: 6Latitude: 39.260347 Longitude: -107.749292
 Footage at Surface: 1911 FNL/FSL FSL 75 FEL/FWL FEL
11. Field Name: BUZZARD CREEK Field Number: 950012. Ground Elevation: 7620 13. County: MESA

14. GPS Data:

Date of Measurement: 10/03/2008 PDOP Reading: 2.1 Instrument Operator's Name: SCOTT VERNON, UINTAH15. If well is ☒ Directional ☐ Horizontal (highly deviated) **submit deviated drilling plan.**
 Footage at Top of Prod Zone: FNL/FSL 1430 FSL 330 FEL/FWL 1430 FSL 330 FEL/FWL FEL
 Sec: 22 Twp: 9S Rng: 93W Sec: 22 Twp: 9S Rng: 93W
16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 94318. Distance to nearest property line: 567 19. Distance to nearest well permitted/completed in the same formation: 545

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.)
MESAVERDE	MVRD	399-4	320	S2

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):
SEE ATTACHED

25. Distance to Nearest Mineral Lease Line: _____ 86 _____ 26. Total Acres in Lease: _____ 1749 _____

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: RECLAIMWATER&BURYCU

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	16	55	60	200	60	0
SURF	12+1/4	8+5/8	32	2,200	845	2,200	0
1ST	7+7/8	4+1/2	11.6	8,402	529	8,402	5,471

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

33. Comments DRILLING PLAN MODIFIED TO REFLECT CEMENT TOP AT 500' OVER TOG. THE WELL LOCATION WAS BUILT 09/08 BUT IS NOT ACTIVELY BEING DRILLED AT THIS TIME. DELTA PETROLEUM CORP IS THE SURFACE OWNER AS OF 4/18/08. SURFACE LOC PER SUNDRY APPROVED 2-13-09.

34. Location ID: _____ 334464 _____

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: CHERYL JOHNSON

Title: REGULATORY Date: _____ Email: CJOHNSON@DELTAPETRO.

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: _____

Permit Number: _____ Expiration Date: _____

API NUMBER

05 077 09706 00

CONDITIONS OF APPROVAL, IF ANY:**Attachment Check List**

Att Doc Num	Name	Doc Description
1790677	APD ORIG & 1 COPY	LF@2155175 1790677
1790678	WELL LOCATION PLAT	LF@2155176 1790678
1790679	TOPO MAP	LF@2155178 1790679
2097404	LEGAL/LEASE DESC	LF@2155177 2097404

Total Attach: 4 Files