

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:
1790653
Plugging Bond Surety

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: DELTA PETROLEUM CORPORATION 4. COGCC Operator Number: 16800
5. Address: 370 17TH ST STE 4300
City: DENVER State: CO Zip: 80202
6. Contact Name: MIKE STANLEY Phone: (303)820-4024 Fax: (303)820-4025
Email: CJOHNSON@DELTAPETRO.COM
7. Well Name: NVEGA Well Number: 22-421
8. Unit Name (if appl): _____ Unit Number: _____
9. Proposed Total Measured Depth: 8648

WELL LOCATION INFORMATION

10. QtrQtr: NESE Sec: 22 Twp: 9S Rng: 93W Meridian: 6
Latitude: 39.260500 Longitude: -107.749339
Footage at Surface: 1948 FNL/FSL FSL 717 FEL/FWL FEL
11. Field Name: BUZZARD CREEK Field Number: 9500
12. 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, UINTAH

15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**
Footage at Top of Prod Zone: FNL/FSL 1620 FNL 330 FEL 330 FEL 330 FEL 330 FEL
Bottom Hole: FNL/FSL 1620 FNL 330 FEL 330 FEL 330 FEL 330 FEL
Sec: 22 Twp: 9S Rng: 93W Sec: 22 Twp: 9S Rng: 93W

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: 943
18. Distance to nearest property line: 604 19. Distance to nearest well permitted/completed in the same formation: 670

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	399-6	160	S2N2

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: 330 26. Total Acres in Lease: 797

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	8,648	529	8,648	5,566

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 09708 00

CONDITIONS OF APPROVAL, IF ANY:

Attachment Check List

Att Doc Num	Name	Doc Description
1790653	APD ORIG & 1 COPY	LF@2155142 1790653
1790654	WELL LOCATION PLAT	LF@2155143 1790654
1790655	TOPO MAP	LF@2155145 1790655
2097412	LEGAL/LEASE DESC	LF@2155144 2097412

Total Attach: 4 Files