

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:

1790638

Plugging Bond Surety

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: 22-323

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

9. Proposed Total Measured Depth: 9252

WELL LOCATION INFORMATION

10. QtrQtr: NESE Sec: 22 Twp: 9S Rng: 93W Meridian: 6

Latitude: 39.260372 Longitude: -107.749453

Footage at Surface: 1920 FNL/FSL 750 FEL/FWL

11. Field Name: BUZZARD CREEK Field Number: 9500

12. Ground Elevation: 7620 13. County: MESA

14. GPS Data:

Date of Measurement: 10/10/2008 PDOP Reading: 2.0 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	FEL/FWL	Bottom Hole:	FNL/FSL	FEL/FWL
2415	FNL	1670	FEL	2415	FNL
					1670
					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: 576 19. Distance to nearest well permitted/completed in the same formation: 792

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	399-6	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: _____ 150 _____ 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	740	2,200	0
1ST	7+7/8	4+1/2	11.6	9,252	477	9,252	5,541

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

33. Comments THE WELL LOCATION WAS BUILT 9/08 BUT IS NOT ACTIVELY BEING DRILLED AT THIS TIME. ALL OTHER CONDITIONS ARE THE SAME. DELTA PETROLEUM IS THE SURFACE OWNER.

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: _____

API NUMBER
05 077 09853 00

Permit Number: _____ Expiration Date: _____

CONDITIONS OF APPROVAL, IF ANY: _____

Attachment Check List

Att Doc Num	Name	Doc Description
1790638	APD ORIG & 1 COPY	LF@2155120 1790638
1790639	WELL LOCATION PLAT	LF@2155121 1790639
1790640	TOPO MAP	LF@2155124 1790640
2097417	LEGAL/LEASE DESC	LF@2155122 2097417

Total Attach: 4 Files