

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



DE	ET	OE	ES
----	----	----	----

Document Number:

1790638

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: 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: 22-323

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: 6Latitude: 39.260372 Longitude: -107.749453
 Footage at Surface: 1920 FNL/FSL FSL 750 FEL/FWL FEL
11. Field Name: BUZZARD CREEK Field Number: 950012. 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, UINTAH15. 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 FELSec: 22 Twp: 9S Rng: 93W Sec: 22 Twp: 9S Rng: 93W16. 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: 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