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Document Number:
400207734

PluggingBond SuretyID
20090069

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

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: Jennifer Barnett Phone: (303)578-2536 Fax: ()
 Email: jbarnett@progressivepcs.net
 7. Well Name: NBC Elk Ranch Well Number: 17-23D
 8. Unit Name (if appl): _____ Unit Number: _____
 9. Proposed Total Measured Depth: 13819

WELL LOCATION INFORMATION

10. QtrQtr: SENW Sec: 17 Twp: 9S Rng: 93W Meridian: 6
 Latitude: 39.278533 Longitude: -107.793375
 Footage at Surface: 2019 feet FNL/FSL FNL 2552 feet FEL/FWL FWL
 11. Field Name: Buzzard Creek Field Number: 9500
 12. Ground Elevation: 7278 13. County: MESA

14. GPS Data:
 Date of Measurement: 09/22/2011 PDOP Reading: 3.0 Instrument Operator's Name: Kyle Tesky

15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**
 Footage at Top of Prod Zone: FNL/FSL 1965 FSL 1909 FWL _____ Bottom Hole: FNL/FSL 1965 FSL 1909 FWL _____
 Sec: 17 Twp: 9S Rng: 93W Sec: 17 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: 422 ft
 18. Distance to nearest property line: 610 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 929 ft

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.)
Dakota	DKTA			
Iles	ILES	369-5	480	W/2, NE/4
Mancos	MNCS			
Niobrara	NBRR			
Williams Fork	WMFK	369-5	480	W/2, NE/4

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 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):

T9S, R93W, 6th P.M.: Sec. 17: E/2SW/4, SW/4SW/4, except that portion of the S/2SW/4 lying south of County Road No. 330E., Sec. 18: SE/4SE/4

25. Distance to Nearest Mineral Lease Line: 660 ft 26. Total Acres in Lease: 152

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: Closed loop

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	16	55	0	60	60	60	0
SURF	17+1/2	13+3/8	68	0	2,200	1,240	2,200	0
1ST	12+1/4	9+5/8	53.5, 47	0	9,000	1,300	9,000	1,800
2ND	8+1/2	5	23.2	8700	13,819	920	13,819	9,500

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

33. Comments A closed loop system will be used for the drilling fluids. There will be a pit used to bury cuttings onsite if they meet Table 910 standards. A 30 day notice letter is not attached because the surface owner waived it in the SUA.

34. Location ID: 425092

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: Jennifer Barnett

Title: Regulatory Agent Date: _____ Email: jbarnett@progressivepcs.net

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

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.

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Attachment Check List

Att Doc Num	Name
400210412	PLAT
400210494	TOPO MAP
400210495	SURFACE AGRMT/SURETY
400210496	DEVIATED DRILLING PLAN

Total Attach: 4 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)