

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
----	----	----	----

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:

1790623

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: 21-434

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

9. Proposed Total Measured Depth: 8309

WELL LOCATION INFORMATION

10. QtrQtr: NESE Sec: 21 Twp: 9s Rng: 93w Meridian: 6

Latitude: 39.260542 Longitude: -107.766294

 Footage at Surface: 1936 FNL/FSL 299 FEL/FWL
 FSL FEL

11. Field Name: vega Field Number: 85930

12. Ground Elevation: 7603 13. County: MESA

14. GPS Data:

Date of Measurement: 01/28/2009 PDOP Reading: 2.1 Instrument Operator's Name: BRIAN BAKE

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
 1425 FSL 350 FEL 1425 FSL 350 FEL
 Sec: 21 Twp: 9S Rng: 93W Sec: 21 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: 3350

18. Distance to nearest property line: 681 19. Distance to nearest well permitted/completed in the same formation: 500

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.)
MESA VERDE	MVRD	399		

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: _____ 117 _____ 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: REC.WATER&BURYCUTS

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	8,309	508	8,309	5,482

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

33. Comments SURFACE LOCATION IS PER APPROVED SUNDRY OF 2/5/09. DRILLING PLAN MODIFIED TO REFLECT CEMENT TOP AT 500' OVER TOG. THE WELL LOCATION WAS BUILT 8/08 BUT IS NOT ACTIVELY BEING DRILLED AT THIS TIME. DELTA PETROLEUM CORP IS THE SURFACE OWNER AS OF 04/18/08.

34. Location ID: 334433

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 09699 00

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

Att Doc Num	Name	Doc Description
1790623	APD ORIG & 1 COPY	LF@2155096 1790623
1790624	WELL LOCATION PLAT	LF@2155097 1790624
1790625	TOPO MAP	LF@2155099 1790625
2097422	LEGAL/LEASE DESC	LF@2155098 2097422

Total Attach: 4 Files