

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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|----|----|----|----|
| DE | ET | OE | ES |
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Document Number:

1789393

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 ☐

Refilling ☒

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: MICHAELSTANLEY Phone: (303)293-9133 Fax: (303)298-8251

Email: \_\_\_\_\_

7. Well Name: NVEGA Well Number: 26-414

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

9. Proposed Total Measured Depth: 8484

WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 25 Twp: 9S Rng: 93W Meridian: 6

Latitude: 39.250758 Longitude: -107.727675

Footage at Surface: 857 FNL/FSL FNL 572 FEL/FWL FWL

11. Field Name: VEGA Field Number: 85930

12. Ground Elevation: 7798 13. County: MESA

14. GPS Data:

Date of Measurement: 10/28/2008 PDOP Reading: 2.0 Instrument Operator's Name: B. HUNTING, UNITAH SURVEYING

15. If well is ☒ Directional ☐ Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL 1163 FNL 358 FEL FEL Bottom Hole: FNL/FSL 1163 FNL 358 FEL FEL  
Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rng: \_\_\_\_\_ Sec: 26 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: 918 ft

18. Distance to nearest property line: 464 ft 19. Distance to nearest well permitted/completed in the same formation: 600 ft

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           | 369-4                   | 320                           | N2                                   |
| WASATCH                | WSTC           | STATEWIDE               |                               |                                      |

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): \_\_\_\_\_

25. Distance to Nearest Mineral Lease Line: 158 ft 26. Total Acres in Lease: 1258

### 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: RECLAIMWTR&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            | 8,484         | 488          | 9,284         | 5,800      |

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

33. Comments THE CONDITIONS ARE THE SAME AS WHEN THE APD WAS ORIGINALLY FILED. A COPY OF THE SUA WAS PREVIOUSLY FILED WITH THE ORIGINAL APD AND IS STILL IN EFFECT.

34. Location ID: \_\_\_\_\_

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: Y Print Name: MICHAEL STANLEY

Title: REGULATORY Date: 7/1/2009 Email: MSTANLEY@DELTAPETRO.C

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: David S. Neslin Director of COGCC Date: 10/29/2009

#### API NUMBER

05 077 09669 00

Permit Number: 20092850 Expiration Date: 10/28/2010

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.

24 HOUR SPUD NOTICE REQUIRED. E-MAIL: david.andrews@state.co.us CEMENT TOP VERIFICATION BY CBL REQUIRED. THE PROPOSED SURFACE CASING IS MORE THAN 50' BELOW THE DEPTH OF THE DEEPEST WATER WELL WITHIN 1MILE OF THE SURFACE LOCATION WHEN CORRECTED FOR ELEVATION DIFFERENCES. THE DEEPEST WATER WELL WITHIN 1 MILE IS 9 FEET DEEP.

### **Attachment Check List**

| Att Doc Num | Name                 | Doc Description    |
|-------------|----------------------|--------------------|
| 1408980     | TOPO MAP             | LF@2099627 1408980 |
| 1408981     | TOPO MAP             | LF@2099629 1408981 |
| 1789393     | APD ORIGINAL         | LF@2099558 1789393 |
| 1789394     | WELL LOCATION PLAT   |                    |
| 1789395     | TOPO MAP             | LF@2099561 1789395 |
| 1789396     | LOCATION PICTURES    | LF@2099623 1789396 |
| 1789397     | LOCATION PICTURES    | LF@2099625 1789397 |
| 1814064     | 30 DAY NOTICE LETTER | LF@2099559 1814064 |

Total Attach: 8 Files