

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:

400056687

Plugging Bond Surety

20090069

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: Kallasandra Moran Phone: (303)575-0323 Fax: (303)575-0324

Email: kmoran@deltapetro.com

7. Well Name: NVega Well Number: 19-111

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

9. Proposed Total Measured Depth: 8466

WELL LOCATION INFORMATION

10. QtrQtr: NENE Sec: 24 Twp: 9S Rng: 93W Meridian: 6

Latitude: 39.264792 Longitude: -107.715992

Footage at Surface: 626 FNL/FSL FNL 854 FEL/FWL FEL

11. Field Name: Buzzard Creek Field Number: 9500

12. Ground Elevation: 7822 13. County: MESA

14. GPS Data:

Date of Measurement: 10/18/2008 PDOP Reading: 2.0 Instrument Operator's Name: Robert Kay/Uintah Surveying

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
 425 FNL 305 FWL 425 FNL 305 FWL
 Sec: 19 Twp: 9S Rng: 92W Sec: 19 Twp: 9S Rng: 92W
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: 5597 ft

18. Distance to nearest property line: 854 ft 19. Distance to nearest well permitted/completed in the same formation: 593 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.)
Iles	ILES	429-11	470	L1,L2,L3,L4,E2
Williams Fork	WMFK	429-11	470	L1,L2,L3,L4,E2

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):
T9S 92W Sec 18- L2, L3, L4; Sec 19-L1

25. Distance to Nearest Mineral Lease Line: 305 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 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: 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	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	24#, 32#	2,200	740	2,200	0
1ST	7+7/8	4+1/2	11.6#	8,466	477	8,466	

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

33. Comments The first string/production top of cement will be >500' above top of gas.

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: _____ Print Name: Kallasandra Moran

Title: Permit Representative Date: _____ Email: kmoran@deltapetro.com

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

Permit Number: _____ Expiration Date: _____

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.

Attachment Check List

Att Doc Num	Name	Doc Description
400058228	WELL LOCATION PLAT	NVega 19-111_Well Location Plat.pdf
400058229	TOPO MAP	Pad 6A_Topo Map.pdf
400058230	SURFACE AGRMT/SURETY	Pad 6A_Redacted SUA_COGCC Copy.pdf
400058231	30 DAY NOTICE LETTER	Nichols-Pad 6A-Waiver10-14-09.pdf
400058232	DEVIATED DRILLING PLAN	NVega 6A 19-111 Plan #1.pdf

Total Attach: 5 Files