

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:

1790632

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: 22-144

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

9. Proposed Total Measured Depth: 8463

WELL LOCATION INFORMATION

10. QtrQtr: NESE Sec: 21 Twp: 9S Rng: 93W Meridian: 6

Latitude: 39.260558 Longitude: -107.766278

 Footage at Surface: 1942 FNL/FSL 295 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, UINTAH

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
 675 FSL 330 FWL 675 FSL 330 FEL
 Sec: 22 Twp: 9S Rng: 93W Sec: 22 Twp: 9S9 3W Rng:
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: 675 19. Distance to nearest well permitted/completed in the same formation: 550

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: _____ 330 _____ 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: 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	845	2,200	0
1ST	7+7/8	4+1/2	11.6	8,463	525	8,463	5,416

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

33. Comments DRILLING PLAN MODIFIED TO REFLECT CEMENT TOP AT 500' OVER TOG. THE WELL LOCATION WAS BUILT 08/08 BUT IS NOT ACTIVELY BEING DRILLED AT THIS TIME. DELTA PETROLEUM CORP IS THE SURFACE OWNER AS OF 4/18/08. SURFACE LOC PER SUNDRY APPROVED 2-5-09.

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 09702 00

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

Att Doc Num	Name	Doc Description
1790632	APD ORIG & 1 COPY	LF@2155110 1790632
1790633	WELL LOCATION PLAT	LF@2155111 1790633
1790634	TOPO MAP	LF@2155114 1790634
2097419	LEGAL/LEASE DESC	LF@2155113 2097419

Total Attach: 4 Files