

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:

1637172

Plugging Bond Surety

3. Name of Operator: WILLIAMS PRODUCTION RMT COMPANY

4. COGCC Operator Number: 96850

5. Address: 1515 ARAPAHOE ST STE 1000

City: DENVER State: CO Zip: 80202

6. Contact Name: JENNIFER HEAD Phone: (303)606-4342 Fax: (303)629-8268

Email: JENNIFER.HEAD@WILLIAMS.COM

7. Well Name: FEDERAL RGU Well Number: 41-26-198

8. Unit Name (if appl): RYAN GULCH UNIT Unit Number: COC068239
X

9. Proposed Total Measured Depth: 12

WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 25 Twp: 1S Rng: 98W Meridian: 6

Latitude: 39.939240 Longitude: -108.350647

Footage at Surface: 941 FNL/FSL FNL 205 FEL/FWL FWL

11. Field Name: SULPHUR CREEK Field Number: 80090

12. Ground Elevation: 6607.7 13. County: RIO BLANCO

14. GPS Data:

Date of Measurement: 09/18/2008 PDOP Reading: 2.5 Instrument Operator's Name: MARK BESSIE

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
168 FNL 721 FEL 168 FNL 721 FEL
Sec: 26 Twp: 1S Rng: 98W Sec: 26 Twp: 1S Rng: 98W16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No

17. Distance to the nearest building, public road, above ground utility or railroad: 2610

18. Distance to nearest property line: 1 19. Distance to nearest well permitted/completed in the same formation: 332

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			
SEGO	SEGO			
WILLIAMS FORK	WMFK			

21. Mineral Ownership: ☐ Fee ☐ State ☒ Federal ☐ Indian Lease #: COC062051

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):

T1S, R98W: SECTION 26 LOT 1; SEC 27: W/2SE, SW; SEC. 28 ALL; SEC. 29 NW, NWNE, SENE, NESE, S2SE

25. Distance to Nearest Mineral Lease Line: 168 26. Total Acres in Lease: 1313

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: EVAPORATION&BACKFILL

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	2	18	48	80	135	80	0
SURF	14+3/4	9+5/8	36	3,952		3,952	0
1ST	8+3/4	4+1/2	11.6	12,659			

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

33. Comments CEMENT WILL BE CIRCULATED TO THE SURFACE IN THE SURFACE STRING. CEMENT WILL BE CIRCULATED TO 200' ABOVE THE UPPERMOST MESAVERDE SAND IN THE PRODUCTION STRING. LOCATION HAS BEEN CONSTRUCTED AND PITS HAVE BEEN BUILT.

34. Location ID: 335671

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 HEAD

Title: REGULATORY Date: _____ Email: JENNIFER.HEAD@WILLIAMS.

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:

Attachment Check List

Att Doc Num	Name	Doc Description
1637172	APD ORIG & 1 COPY	LF@2158215 1637172
1637173	DEVIATED DRILLING PLAN	LF@2158216 1637173
1637174	FED. DRILLING PERMIT	LF@2158217 1637174
1637175	DRILLING PLAN	LF@2158218 1637175
1637176	SURFACE PLAN	LF@2158219 1637176
1940926	PROPOSED BMPs	LF@2158220 1940926

Total Attach: 6 Files