

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:
1637353
Plugging Bond Surety
20030107

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: GREG DAVIS Phone: (303)606-4071 Fax: (303)629-8272
Email: GREG.J.DAVIS@WILLIAMS.COM

7. Well Name: WILLIAMS Well Number: GM 434-32

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

9. Proposed Total Measured Depth: 7518

WELL LOCATION INFORMATION

10. QtrQtr: SENE Sec: 32 Twp: 6S Rng: 96W Meridian: 6
Latitude: 39.480547 Longitude: -108.126683

Footage at Surface: 2633 FNL/FSL FNL 1134 FEL/FWL FEL

11. Field Name: Grand Valley Field Number: 31290

12. Ground Elevation: 5945 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 08/20/2008 PDOP Reading: 1.8 Instrument Operator's Name: ROBERT KAY

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

Footage at Top of Prod Zone: FNL/FSL 291 FSL 2234 FEL 291 FEL/FWL 2234 FEL
Sec: 32 Twp: 6S Rng: 96W Sec: 32 Twp: 6S Rng: 96W

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: 3800 ft

18. Distance to nearest property line: 264 ft 19. Distance to nearest well permitted/completed in the same formation: 527 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.)
WILLIAMS FORK	WMFK	510-9	160	SE/4

21. Mineral Ownership: Fee State Federal Indian Lease #: COC24099
 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: 292 ft 26. Total Acres in Lease: 857

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 & BACKFIL
 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	18	48	45	25	45	0
SURF	13+1/2	9+5/8	32.3	1,400	489	1,400	0
1ST	7+7/8	4+1/2	11.6	7,518	539	7,518	

32. BOP Equipment Type: Annular Preventer Double Ram Rotating Head None
 33. Comments **LOCATION HAS BEEN CONSTRUCTED. PITS ARE CONSTRUCTED. NO PAD EXPANSION IS NECESSARY. NO RIG ON LOCATION. CLOSED LOOP. WILLIAMS OWNS SURFACE. THERE HAVE BEEN NO CHANGES TO LEASE CONDITIONS SINCE THE ORIGINAL FORM 2 WAS FILED. NOT IN AN RSO. SEE WILLIAMS PRODUCTION RMT COMPANY MASTER APD, STANDARD OPERATING PRACTICES VERSION: APRIL 27, 2006. changed Line 17 to 3800', changed Line 18 to 264' jps 12/22**

34. Location ID: 335492
 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: GREG DAVIS
 Title: PERMITS Date: 10/26/2009 Email: GREG.J.DAVIS@WILLIAMS.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. Nesline Director of COGCC Date: 12/23/2009
 Permit Number: _____ Expiration Date: 12/22/2010

API NUMBER

05 045 17830 00

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 GARFIELD COUNTY RULISON-FIELD NOTICE TO OPERATORS. NOTE: ALL NOTICES SHALL BE GIVEN VIA E-MAIL. SEE ATTACHED NOTICE.

CEMENT-TOP VERIFICATION BY CBL REQUIRED THE MOISTURE CONTENT OF ANY DRILL CUTTINGS IN A CUTTINGS PIT, TRENCH, OR PILE SHALL BE AS LOW AS PRACTICABLE TO PREVENT ACCUMULATION OF LIQUIDS GREATER THAN DE-MINIMIS AMOUNTS. AT THE TIME OF CLOSURE, THE DRILL CUTTINGS MUST ALSO MEET THE APPLICABLE STANDARDS OF TABLE 910-1. NO PORTION OF ANY PIT THAT WILL BE USED TO HOLD LIQUIDS SHALL BE CONSTRUCTED ON FILL MATERIAL, UNLESS THE PIT AND FILL SLOPE ARE DESIGNED AND CERTIFIED BY A PROFESSIONAL ENGINEER, SUBJECT TO REVIEW AND APPROVAL BY THE DIRECTOR PRIOR TO CONSTRUCTION OF THE PIT. THE CONSTRUCTION AND LINING OF THE PIT SHALL BE SUPERVISED BY A PROFESSIONAL ENGINEER OR THEIR AGENT. THE ENTIRE BASE OF THE PIT MUST BE IN CUT. THE PROPOSED SURFACE CASING IS MORE THAN 50' BELOW THE DEPTH OF THE DEEPEST WATER WELL WITHIN 1-MILE OF THE SURFACE LOCATION WHEN CORRECTED FOR ELEVATION DIFFERENCES. THE DEEPEST WATER WELL WITHIN 1-MILE IS 120 FEET DEEP.

Attachment Check List

Att Doc Num	Name	Doc Description
1637353	APD ORIGINAL	LF@2166071 1637353
1637354	FED. DRILLING PERMIT	LF@2166072 1637354
400011853	FORM 2 SUBMITTED	LF@2177451 400011853

Total Attach: 3 Files