

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:

2093339

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: GREG DAVIS Phone: (303)606-4071 Fax: (303)629-8272

Email: GREG.J.DAVIS@WILLIAMS.COM

7. Well Name: SAVAGE Well Number: RWF 323-27

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

9. Proposed Total Measured Depth: 7772

WELL LOCATION INFORMATION

10. QtrQtr: NWSE Sec: 27 Twp: 6S Rng: 94W Meridian: 6

Latitude: 39.493524 Longitude: -107.871413

 Footage at Surface: 1656 FNL/FSL 1851 FEL/FWL
 FSL FEL

11. Field Name: RULISON Field Number: 75400

12. Ground Elevation: 5259 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 04/30/2008 PDOP Reading: 3.0 Instrument Operator's Name: J. KIRKPATRICK

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
 1896 FSL 2186 FWL 1896 FSL 2186 FWL
 Sec: 27 Twp: 6S Rng: 94W Sec: 27 Twp: 6S Rng: 94W
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: 1100 ft

18. Distance to nearest property line: 460 ft 19. Distance to nearest well permitted/completed in the same formation: 611 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	139-66	320	W/2

21. Mineral Ownership: ☒ Fee ☐ State ☐ Federal ☐ Indian Lease #: CA
COC57575

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: 325 ft 26. Total Acres in Lease: 421

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: RE-USED

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	1,108	390	1,108	0
1ST	7+7/8	4+1/2	11.6	7,772	700	7,772	200

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

33. Comments CLOSED LOOP. PAD HAS NOT BEEN BUILT. THERE HAVE BEEN NO CHANGES TO LEASE CONDITIONS OR DRILLING PLANS SINCE THE ORIGINAL FORM 2 WAS FILED.

34. Location ID: 335278

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: SUPERVISOR PERMITS Date: _____ 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: _____ Director of COGCC Date: _____

API NUMBER 05 045 17784 00	Permit Number: _____	Expiration Date: _____
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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
2093339	APD ORIGINAL	LF@2200523 2093339

Total Attach: 1 Files