

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:
400034716
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 423-34

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

9. Proposed Total Measured Depth: 6597

WELL LOCATION INFORMATION

10. QtrQtr: NESW Sec: 34 Twp: 6S Rng: 96W Meridian: 6
Latitude: 39.478650 Longitude: -108.096153

Footage at Surface: 1958 FNL/FSL FSL 2182 FEL/FWL FWL

11. Field Name: Grand Valley Field Number: 31290

12. Ground Elevation: 5355.3 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 06/02/2009 PDOP Reading: 2.3 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 _____ FEL/FWL _____ Bottom Hole: FNL/FSL _____ FEL/FWL _____
1534 FSL 2405 FEL 1534 FSL 2405 FEL
Sec: 34 Twp: 6S Rng: 96W Sec: 34 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: 293 ft

18. Distance to nearest property line: 360 ft 19. Distance to nearest well permitted/completed in the same formation: 809 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	479-11	160	SE/4

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):
T6S-R96W: Section 34 SE/4

25. Distance to Nearest Mineral Lease Line: 647 ft 26. Total Acres in Lease: 162

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-use and evaporation

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#	660	230	660	0
1ST	7+7/8	4+1/2	11.6#	6,597	548	6,597	

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

33. Comments Williams owns the surface where the subject well will be drilled. Closed Loop. Production casing cement will be 200' above uppermost mesaverde sand.

34. Location ID: 335302

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: 2/2/2010 Email: Greg.J.Davis@Williams.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: David S. Nesline Director of COGCC Date: 3/31/2010

API NUMBER
05 045 19309 00

Permit Number: _____ Expiration Date: 3/30/2012

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.

1)24 HOUR SPUD NOTICE REQUIRED. E-MAIL: Shaun.Kellerby@state.co.us 2)GARFIELD COUNTY RULISON FIELD NOTICE TO OPERATORS. NOTE: ALL NOTICES SHALL BE GIVEN VIA E-MAIL. SEE ATTACHED NOTICE 3)CEMENT TOP VERIFICATION BY CBL REQUIRED. 4)THE PROPOSED SURFACE CASING IS MORE THAN 50' BELOW THE DEPTH OF THE DEEPEST WATER WELL WITHIN 1MILE OF THE SURFACE LOCATION WHEN CORRECTED FOR ELEVATION DIFFERENCES. THE DEEPEST WATER WELL WITHIN 1 MILE IS 130 FEET DEEP.

Attachment Check List

Att Doc Num	Name	Doc Description
400034743	WELL LOCATION PLAT	LF@2420016 400034743
400034749	DEVIATED DRILLING PLAN	LF@2420017 400034749
400034751	DEVIATED DRILLING PLAN	LF@2420018 400034751
400034792	LOCATION PICTURES	LF@2420020 400034792
400039368	FORM 2 SUBMITTED	LF@2420021 400039368

Total Attach: 5 Files