

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)894-2100 Fax: (303)894-2109

## SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (Page 2 of this form.) Identify well or other facility by API Number or by COGCC Facility ID. Operator shall send an informational copy of all sundry notices for wells located in High Density Areas to the Local Government Designee (Rule 603b.)

1. OGCC Operator Number: 96850	4. Contact Name
2. Name of Operator: Williams Production RMT Co.	Angela Nelfert
3. Address: 1515 Arapahoe St., Tower 3, Suite 1000	Phone: (303) 806-4398
City: Denver State: CO Zip: 80202	Fax: (303) 829-8272
5. API Number 05-045-19057-00	OGCC Facility ID Number
6. Well/Facility Name: Jolley	7. Well/Facility Number KP 44-8
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): NESE 8-T6S-91W 6th PM	
9. County: Garfield	10. Field Name: Kokopell
11. Federal, Indian or State Lease Number:	

## General Notice

☐ **CHANGE OF LOCATION:** Attach New Survey Plat (a change of surface qtr/qtr is substantive and requires a new permit)

Change of Surface Footage from Exterior Section Lines: FEL/FWL

Change of Surface Footage to Exterior Section Lines: FEL/FWL

Change of Bottomhole Footage from Exterior Section Lines: FEL/FWL

Change of Bottomhole Footage to Exterior Section Lines: FEL/FWL

Bottomhole location Qtr/Qtr, Sec, Twp, Rng, Mer: attach directional survey

Latitude \_\_\_\_\_ Distance to nearest property line \_\_\_\_\_ Distance to nearest bldg, public rd, utility or RR \_\_\_\_\_

Longitude \_\_\_\_\_ Distance to nearest lease line \_\_\_\_\_ Is location in a High Density Area (rule 603b)? Yes/No \_\_\_\_\_

Ground Elevation \_\_\_\_\_ Distance to nearest well same formation \_\_\_\_\_ Surface owner consultation date: \_\_\_\_\_

## GPS DATA:

Date of Measurement \_\_\_\_\_ PDOP Reading \_\_\_\_\_ Instrument Operator's Name \_\_\_\_\_

☐ **CHANGE SPACING UNIT**

Formation	Formation Code	Spacing order number	Unit Acreage	Unit configuration	<input type="checkbox"/> Remove from surface bond Signed surface use agreement attached

☐ **CHANGE OF OPERATOR (prior to drilling):**

Effective Date: \_\_\_\_\_

Plugging Bond: ☐ Blanket ☐ Individual

☐ **CHANGE WELL NAME** From: \_\_\_\_\_ To: \_\_\_\_\_ Effective Date: \_\_\_\_\_

☐ **NUMBER**

☐ **ABANDONED LOCATION:**

Was location ever built? ☐ Yes ☐ No

Is site ready for inspection? ☐ Yes ☐ No

Date Ready for inspection: \_\_\_\_\_

Has Production Equipment been removed from site? ☐ Yes ☐ No

MIT required if shut in longer than two years. Date of last MIT \_\_\_\_\_

☐ **SPUD DATE:** \_\_\_\_\_

☐ **REQUEST FOR CONFIDENTIAL STATUS** (6 mos from data casing set)

☐ **SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK** \*submit cbl and cement job summaries.

Method used	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom	Date

☐ **RECLAMATION:** Attach technical page describing final reclamation procedures per Rule 1004.

Final reclamation will commence on approximately \_\_\_\_\_

☐ Final reclamation is completed and site is ready for inspection.

## Technical Engineering/Environmental Notice

☒ **Notice of Intent**

Approximate Start Date: 04/21/2010

☐ Report of Work Done

Date Work Completed: \_\_\_\_\_

## Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)

☐ Intent to Recomplete (submit form 2)

☐ Change Drilling Plans

☐ Gross Interval Changed?

☐ Casing/Cementing Program Change

☐ Request to Vent or Flare

☐ Repair Well

☐ Rule 502 variance requested

☒ Other: Request to complete \_\_\_\_\_

☐ E&P Waste Disposal

☐ Beneficial Reuse of E&P Waste

☐ Status Update/Change of Remediation Plans

for Spills and Releases

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.



02577082

DE	ET	OE	ES
----	----	----	----

RECEIVED

APR 16 2010

COGCC/Rifle Office

Complete the Attachment  
Checklist

OP OGCC

Survey Plat	
Directional Survey	
Surface Eqmpt Diagram	
Technical Info Page	
Other	

FORM

4

Rev 12/05

## TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

RECEIVED

APR 16 2010

COGCC/Rifle Office

1. OGCC Operator Number: 96850 API Number: 05-045-19057-00
2. Name of Operator: Williams Production RMT Co OGCC Facility ID #
3. Well/Facility Name: Jolley Well/Facility Number: KP 44-8
4. Location (QtrQtr, Sec, Twp, Rng, Meridian): NESE 8-T6S-91W 6th PM

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within 30 days of work completed as a "subsequent" report and must accompany Form 4, page 1.

5.

DESCRIBE PROPOSED OR COMPLETED OPERATIONS

THE REFERENCED WELL WAS SUCCESSFULLY CEMENTED ON 3/22/2010

Williams Production RMT Co Request approval from the COGCC to commence Completion Operations.

**ATTACHMENTS:**

CBL  
WELLBORE SCHEMATIC  
TEMPERATURE PLOT  
BRADENHEAD PRESSURE SUMMARY



Bradenhead Pressure Summary

WELL: Jolley KP 44-8

LOCATION: NE/4 SE/4 SEC. 8 T6S-R91W 6<sup>TH</sup> PM

API#: 05-045-19057-00

TEMP. LOG RUN DATE: 03-22-10

TOP OF CEMENT: 3240' (FROM CBL)

TOP OF GAS: 5195'

**BRADENHEAD PRESSURES (psig)**

HRS	PSI	BBLS TO FILL
6	0	4
12	0	0
24	0	0
48	0	0
72	0	0

TOC 2400

KK

RECEIVED  
APR 16 2010  
COGCC/Rifle Office

Williams Production RMT Co.  
Jolley KP 44-8  
Kokopelli Field  
SHL 2393' FSL 1002' FEL (NE/4 SE/4) BHL 1179' FSL 663' FEL (SE/4 SE/4)  
Section 8-T6S-R91W 6th PM  
Garfield County, Colorado

Formation Tops  
(Measured Depths)

Conductor 24" Hole 16" casing/liner 90' W/34 sks cmt  
Cmt @ Surface - (Cmt circ to surf during cmt job)  
9 5/8" 32.3# ppf Csg. Set @1490.1'  
In 12 1/4" Hole W/470 Sks. Cmt

Top Of Cement 3240'

Mesaverde @ 3459'

Cameo @ 6955'

Rollins @ 7195'

PBTD @  
TMD @ 7330'  
TVD @ 7098'  
4-1/2", 11.6 ppf. Csg. Set @7315.4' W/1080' sks Cmt

