

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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Document Number:

400055644

Plugging Bond Surety

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

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: Howard Harris Phone: (303)606-4086 Fax: (303)629-8272
 Email: howard.harris@williams.com
 7. Well Name: Holl Well Number: RWF 24-31
 8. Unit Name (if appl): _____ Unit Number: _____
 9. Proposed Total Measured Depth: 8076

WELL LOCATION INFORMATION

10. QtrQtr: NWSW Sec: 31 Twp: 6S Rng: 94W Meridian: 6
 Latitude: 39.479978 Longitude: -107.934354
 Footage at Surface: FNL/FSL FEL/FWL
2126 FSL 1001 FWL
 11. Field Name: Rulison Field Number: 75400
 12. Ground Elevation: 5351 13. County: GARFIELD

14. GPS Data:
Date of Measurement: 08/15/2008 PDOP Reading: 5.9 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
1015 FSL 1964 FWL 1015 FSL 1964 FWL
 Sec: 31 Twp: 6S Rng: 94W Sec: 31 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: 454 ft
 18. Distance to nearest property line: 335 ft 19. Distance to nearest well permitted/completed in the same formation: 396 ft

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	139-83	320	S/2 Fee Pooled

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):
See Attached

25. Distance to Nearest Mineral Lease Line: 200 ft 26. Total Acres in Lease: 34

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, Evaporation & Back

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	1,114	389	1,114	0
1ST	7+7/8	4+1/2	11.6	8,076	623	8,076	4,248

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

33. Comments Closed mud system, top of cement will be 200' above top of MESaverde. Surface use agreement attached to form 2A.

34. Location ID: _____

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: Howard Harris

Title: Sr. Regulatory Specialist Date: _____ Email: howard.harris@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: _____ Director of COGCC Date: _____

API NUMBER	Permit Number: _____	Expiration Date: _____
05	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
400056232	LOCATION DRAWING	Location Plat RWF 24-31.pdf
400056233	LEASE MAP	Johnson Lease.pdf
400056234	DEVIATED DRILLING PLAN	RWF 24-31 dir page plot#2 12Apr10 kjs.pdf
400056235	DEVIATED DRILLING PLAN	RWF 24-31 dir plan#2 12Apr10 kjs.pdf

Total Attach: 4 Files