

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



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

Document Number:

1687279

Plugging Bond Surety

20030107

APPLICATION FOR PERMIT TO:

1. ☐ Drill, ☐ Deepen, ☐ Re-enter, ☒ **Recomplete and Operate**

2. TYPE OF WELL

OIL ☐ GAS ☐ COALBED ☐ OTHER DISPOSAL WELL
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: JENNIFER HEAD Phone: (303)572-3900 Fax: (303)629-8265

Email: _____

7. Well Name: CHEVRON Well Number: TR 534-3-597

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

9. Proposed Total Measured Depth: 9991

WELL LOCATION INFORMATION

10. QtrQtr: NWSE Sec: 3 Twp: 5S Rng: 97W Meridian: 6

Latitude: 39.640187 Longitude: -108.264136

Footage at Surface: 1782 FNL/FSL FSL 2508 FEL/FWL FEL

11. Field Name: TRAIL RIDGE Field Number: 83825

12. Ground Elevation: 8566 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 07/20/2007 PDOP Reading: 2.2 Instrument Operator's Name: MARK BESSIE

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

Footage at Top of Prod Zone: FNL/FSL 181 FSL 1996 FEL FEL Bottom Hole: FNL/FSL 181 FSL 1996 FEL FEL
Sec: _____ Twp: _____ Rng: _____ Sec: 3 Twp: 5S Rng: 97W

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: 1 MILE

18. Distance to nearest property line: 1400 FT 19. Distance to nearest well permitted/completed in the same formation: 660 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.)
WASATCH	WSTC			
WILLIAMS FORK	WMFK	510-17		

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 ORIGINAL FORM 2

25. Distance to Nearest Mineral Lease Line: 1996 FT 26. Total Acres in Lease: 17315

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: EVAP AND BACKFILLING

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	60	100	60	
SURF	14+3/4	9+5/8		3,087	1,520	3,087	
1ST	7+7/8	4+1/2		9,880	900	9,880	5,330

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

33. Comments SEE ACCOMPANYING SUNDRY NOTICE TO RECOMPLETE AND PREFORM INJECTION TEST.

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: Y Print Name: JENNIFER HEAD

Title: REGULATORY TEAM LEAD HIGH Date: 7/8/2009 Email: JENNIFER.HEAD@WILLIAMS.

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. Neslin Director of COGCC Date: 7/9/2009

API NUMBER

05 045 12640 00

Permit Number: 20092832 Expiration Date: 7/8/2011

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.