



State of Colorado

Oil and Gas Conservation Commission

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



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JUN 21 2010
COGCC

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

1. OGCC Operator Number: 96850
 2. Name of Operator: Williams Production RMT Company
 3. Address: 1515 Arapahoe St., Tower 3, Suite 1000
 City Denver State: CO Zip: 80202
 4. Contact Name: Sandra Salazar
 Phone: (303) 629-8456
 Fax: (303) 629-8272

Complete the Attachment Checklist

5. API Number 05-045-18074-00 6. County: Garfield
 7. Well Name: Federal Well Number: RWF 514-19
 8. Location (QtrQtr, Sec, Twp, Rng, Meridian): NWSW Sec. 19-T6S-R94W
 Footage at surface: 1411 FNL/FSL FSL 439 FEL/FWL FWL
 As Drilled Latitude: 39.507036 As Drilled Longitude: -107.936683
 GPS Data:
 Date of Measurement: 06/23/09 PDOP Reading: 1.9 GPS Instrument Operator's Name: Wayne Kirkpatrick

OP	OGCC
Logs	
Directional Survey**	<input checked="" type="checkbox"/>
DST Analysis	
Core Analysis	
Cmt summary*	<input checked="" type="checkbox"/>

** If directional, footage at Top of Prod. Zone 243 FNL/FSL FSL 319 FEL/FWL FWL Sec, Twp, Rng SWSW Sec. 19-T6S-R94W
 ** If directional, footage at Bottom Hole 227 FNL/FSL FSL 333 FEL/FWL FWL Sec, Twp, Rng SWSW Sec. 19-T6S-R94W

9. Field Name: Rulison 10. Field Number: 75400
 11. Federal, Indian or State Lease Number: COC62160

15. Well Classification
 Dry Oil Gas
 Coalbed Disposal
 Stratigraphic
 Enhanced Recovery
 Gas Storage
 Observation
 Other: _____

12. Spud Date: (when the 1st bit hit the dirt) 1/3/2010 13. Date TD: 1/12/2010 14. Date Casing Set or D&A: 1/14/2010

16. Total Depth MD 8565 TVD** 8424 17. Plug Back Total Depth MD 8565 TVD** 8424

18. Elevations GR 5733 KB 5755.5
 One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run: (CH): RPM and CBL

20. **CASING, LINER and CEMENT**
 *If Cement Bond Log was not run, submit contractor's cement job summary for each string cemented

String	Hole Size	Csg/Liner Size	Csg/Liner Top	Csg/Tool Setting Depth	Number of sacks cmt	Cement Top	Cement Bottom	CBL*	Calculated*
Conductor	24"	18"	Surface	60	22	Surface	60		Visual
Surface	13 1/2"	9 5/8"	Surface	1125	320	Surface	1125		Visual
Production	8 3/4"	4 1/2"	Surface	8546	1225	4900	8546	<input checked="" type="checkbox"/>	
			Squeeze		200	4166	4324		<input checked="" type="checkbox"/>
			Stage, Squeeze, Remedial Cement Job						
			Stage, Squeeze, Remedial Cement Job						
Liner									
Liner									

21. **FORMATION LOG INTERVALS AND TEST ZONES**

FORMATION NAME	Measured Depth		Check if applies	
	Top	Bottom	DST	Cored
G Sand	2460			
Mesaverde	4969			
Cameo	7455			
Rollins	8409			

All DST and Core Analyses must be submitted to COGCC

COMMENTS

Surface Pressure = 0#

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.
 Print Name: Sandra Salazar E-mail: Sandra.Salazar@Williams.com
 Signature: [Signature] Title: Permit Technician Date: 6/19/10