



02054860

FORM
4
Rev 12/05

Page 1

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 OGCC 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: Greg Davis	Complete the Attachment Checklist OP OGCC
2. Name of Operator: Williams Production RMT Co.	Phone: (303) 606-4071	
3. Address: 1515 Arapahoe St., Tower 3, Suite 1000	Fax: (303) 629-8268	
City: Denver State: CO Zip 80202		
5. API Number 05-045-19631-00	OGCC Facility ID Number	Survey Plat
6. Well/Facility Name: Savage	7. Well/Facility Number RWF 431-3	Directional Survey
8. Location (Qtr/Clr, Sec, Twp, Rng, Meridian): SWSE 34-T6S-94W		Surface Eqpm Diagram
9. County: Garfield	10. Field Name: Rulison	Technical Info Page X
11. Federal, Indian or State Lease Number:		Other

General Notice

<input type="checkbox"/> CHANGE OF LOCATION: Attach New Survey Plat (a change of surface qtr/qr is substantive and requires a new permit)	
Change of Surface Footage from Exterior Section Lines: Change of Surface Footage to Exterior Section Lines: Change of Bottomhole Footage from Exterior Section Lines: Change of Bottomhole Footage to Exterior Section Lines: Bottomhole location Qtr/Clr, Sec, Twp, Rng, Mer 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 <input checked="" type="checkbox"/> NO Ground Elevation _____ Distance to nearest well same formation _____ Surface owner consultation date: _____	FNL/FSL FEL/FWL attach directional survey
GPS DATA: Date of Measurement _____ PDOP Reading _____ Instrument Operator's Name _____	
<input type="checkbox"/> 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
<input type="checkbox"/> CHANGE OF OPERATOR (prior to drilling): Effective Date: _____ Plugging Bond: <input type="checkbox"/> Blanket <input type="checkbox"/> Individual	<input type="checkbox"/> CHANGE WELL NAME NUMBER From: _____ To: _____ Effective Date: _____
<input type="checkbox"/> ABANDONED LOCATION: Was location ever built? <input type="checkbox"/> Yes <input type="checkbox"/> No Is site ready for inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No Date Ready for Inspection: _____	<input type="checkbox"/> NOTICE OF CONTINUED SHUT IN STATUS Date well shut in or temporarily abandoned: _____ Has Production Equipment been removed from site? <input type="checkbox"/> Yes <input type="checkbox"/> No MIT required if shut in longer than two years. Date of last MIT _____
<input type="checkbox"/> SPUD DATE: _____	<input type="checkbox"/> REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)
<input type="checkbox"/> 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 _____	
<input type="checkbox"/> RECLAMATION: Attach technical page describing final reclamation procedures per Rule 1004. Final reclamation will commence on approximately _____ <input type="checkbox"/> Final reclamation is completed and site is ready for inspection.	

Technical Engineering/Environmental Notice

<input checked="" type="checkbox"/> Notice of Intent Approximate Start Date: 1/24/2011	<input type="checkbox"/> Report of Work Done Date Work Completed: _____
Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)	
<input type="checkbox"/> Intent to Recomplete (submit form 2) <input checked="" type="checkbox"/> Change Drilling Plans <input type="checkbox"/> Gross Interval Changed? <input checked="" type="checkbox"/> Casing/Cementing Program Change	<input type="checkbox"/> Request to Vent or Flare <input type="checkbox"/> Repair Well <input type="checkbox"/> Rule 502 variance requested <input checked="" type="checkbox"/> Other: Increase Sfc Csg Depth
<input type="checkbox"/> E&P Waste Disposal <input type="checkbox"/> Beneficial Reuse of E&P Waste <input type="checkbox"/> Status Update/Change of Remediation Plans for Spills and Releases	

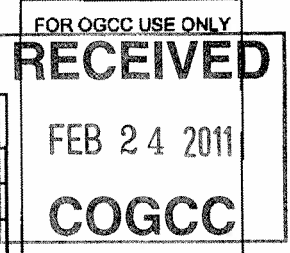
I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.

Signed: Greg Davis Date: 1/24/11 Email: Greg.J.Davis@Williams.com
 Print Name: Greg Davis Title: Supervisor Permits

COGCC Approved: David Anderson Title: PE II Date: 1/26/2011
 CONDITIONS OF APPROVAL, IF ANY:



TECHNICAL INFORMATION PAGE



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|--|----------------------------|-----------------------|-----------------|
| 1. OGCC Operator Number: | 96850 | API Number: | 05-045-19631-00 |
| 2. Name of Operator: | Williams Production RMT Co | OGCC Facility ID # | |
| 3. Well/Facility Name: | Savage | Well/Facility Number: | RWF 431-3 |
| 4. Location (QtrQtr, Sec, Twp, Rng, Meridian): | SWSE Sec 34 T6S-R94W | | |

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

Williams requests permission to deepen 32.3# 9 5/8" Sfc Csg from: 1102' (MD) to: 1832' (MD). Cement will be circulated to surface.