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FORM 22 Rev 6/99

State of Colorado
Oil and Gas Conservation Commission

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

FOR OGCC USE ONLY

Report taken by:

ACCIDENT REPORT

As required by Rule 602.b.

DESCRIPTION OF ACCIDENT (Please be as specific as possible)

Name of Operator: Williams Production RMT Company
Date of Incident: April 7, 2011
Type of Facility (well, tank battery, flow line, pit): Well Pad
Well Name and Number: Federal RGU 33-24-198
API Number: 103-10937-00
Connect to Accident (land owner, royalty owner, etc).: Operator

Location
County: Rio Blanco
Field Name: Sulpher Creek
QtrQtr: NW SE Section: 24
Township: 1 South Range: 98 West
Meridian: 6th PM

Provide a detailed description of the accident, problem, and cause (equipment failure, human error, etc.):

A completions contractor that was delivering chemicals for a frac job had the chemical splash onto his unprotected hands when hooking up a hose to a pump. The contractor was treated at a medical center but admitted into the University of Utah Burn Center in Salt Lake City the following day for the burns. Williams was not notified of the incident until April 21, 2011. Shaun Kellerby with the COGCC was notified of the incident by e-mail on April 21, 2011 at 3:17 PM.

OTHER NOTIFICATIONS

List the parties and agencies notified (County, BLM, EPA, DOT, Local Emergency Planning Coordinator or other).

Date	Agency	Contact Person	Response

Accident Tracking No:_____