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Document Number:
 400192517
 PluggingBond SuretyID
 20030107

APPLICATION FOR PERMIT TO:

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

2. TYPE OF WELL
 OIL GAS COALBED OTHER Convert to Injector
 SINGLE ZONE MULTIPLE COMMINGLE

Refiling
 Sidetrack

3. Name of Operator: WILLIAMS PRODUCTION RMT COMPANY LLC 4. COGCC Operator Number: 96850
 5. Address: 1001 17TH STREET - SUITE #1200
 City: DENVER State: CO Zip: 80202
 6. Contact Name: Greg Davis Phone: (303)606-4071 Fax: (303)629-8268
 Email: Greg.J.Davis@Williams.com
 7. Well Name: Williams Well Number: GM 239-36
 8. Unit Name (if appl): _____ Unit Number: _____
 9. Proposed Total Measured Depth: 7092

WELL LOCATION INFORMATION

10. QtrQtr: NESW Sec: 36 Twp: 6S Rng: 96W Meridian: 6
 Latitude: 39.479130 Longitude: -108.060723
 Footage at Surface: 2122 feet FSL 1683 feet FWL
 11. Field Name: Grand Valley Field Number: 31290
 12. Ground Elevation: 5597 13. County: GARFIELD

14. GPS Data:
 Date of Measurement: 01/05/2007 PDOP Reading: 3.2 Instrument Operator's Name: Ivan Martin

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
2152 FSL 780 FWL 2152 FSL 780 FWL
 Sec: 36 Twp: 6S Rng: 96W Sec: 36 Twp: 6S Rng: 96W

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: 5000 ft
 18. Distance to nearest property line: 151 ft 19. Distance to nearest well permitted/completed in the same formation: 443 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			

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 Bond \$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):

(Unleased of record. Williams owns 100% Surface and Minerals.)

25. Distance to Nearest Mineral Lease Line: 133 ft 26. Total Acres in Lease: 128

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 28 or 29 are yes, is this location in a sensitive area (Rule 901.e)? Yes No

31. Mud disposal: Offsite Onsite

If 28, 29, or 30 are "Yes" a pit permit may be required.

Method: Land Farming Land Spreading Disposal Facility Other: Re-use and evaporation

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	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
CONDUCTOR	24	18	48#	0	45	25	45	0
SURF	13+1/2	9+5/8	32.3#	0	1,122	325	1,122	0
1ST	7+7/8	4+1/2	11.6#	0	7,092	853	7,092	2,390

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

33. Comments Williams owns the surface where operations will take place. Site will be reclaimed per Williams 2003 Reclamation Plan.

34. Location ID: 335145

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: Greg Davis

Title: Supervisor Permits Date: 8/4/2011 Email: Greg.J.Davis@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: David S. Neslin Director of COGCC Date: 8/31/2011

API NUMBER
05 045 14693 00

Permit Number: _____ Expiration Date: 8/30/2013

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.

(1) COMPLIANCE WITH THE MOST CURRENT REVISION OF THE NORTHWEST COLORADO NOTIFICATION POLICY IS REQUIRED.

(2) GARFIELD COUNTY RULISON-FIELD NOTICE TO OPERATORS. NOTE: ALL NOTICES SHALL BE GIVEN VIA E-MAIL. SEE ATTACHED NOTICE.

(3) APPROVAL OF THIS FORM DOES NOT AUTHORIZE INJECTION. AUTHORIZATION TO INJECT REQUIRES APPROVAL OF FORM 31 AND FORM 33.

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400192517	FORM 2 SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Removed spacing information. This is not applicable to a injection well.	8/30/2011 4:05:55 PM

Total: 1 comment(s)

BMP

<u>Type</u>	<u>Comment</u>

Total: 0 comment(s)