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Document Number:
400249449

PluggingBond SuretyID
20030107

APPLICATION FOR PERMIT TO:

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

2. TYPE OF WELL

OIL GAS COALBED OTHER Water Disposal

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: Howard Harris Phone: (303)606-4086 Fax: (303)629-8268
 Email: howard.harris@williams.com

7. Well Name: Clough Well Number: RWF 434-21

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

9. Proposed Total Measured Depth: 7549

WELL LOCATION INFORMATION

10. QtrQtr: SWSE Sec: 21 Twp: 6S Rng: 94W Meridian: 6
 Latitude: 39.506220 Longitude: -107.893043

Footage at Surface: 1037 feet FSL 2610 feet FEL

11. Field Name: Rulison Field Number: 75400

12. Ground Elevation: 5283 13. County: GARFIELD

14. GPS Data:
 Date of Measurement: 01/20/2005 PDOP Reading: 0.0 Instrument Operator's Name: NA

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

1022 FSL 2051 FEL 1011 FSL 2052 FEL

Sec: 21 Twp: 6S Rng: 94W Sec: 21 Twp: 6S Rng: 94W

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: 223 ft

18. Distance to nearest property line: 223 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 566 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	495-3	320	S/2

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):

See Attached

25. Distance to Nearest Mineral Lease Line: 700 ft

26. Total Acres in Lease: 11550

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, Evap & Backfill

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	50	45	0
SURF	13+1/2	9+5/8	32.3	0	1,125	565	1,125	0
1ST	7+7/8	4+1/2	11.6	0	7,549	3,350	7,549	3,350

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

33. Comments This permit is to convert the present Williams Fork producing well to a Upper Williams Fork water disposal well. A sundry form 4 is being submitted with the procedure to convert the well. Forms 31, 26 and 33 are also being submitted later. Survey As Drilled PDOP not available at this time. Date is survey plat date

34. Location ID: 335334

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: Howard Harris

Title: Sr. Regulatory Specialist Date: _____ Email: howard.harris@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: _____ Director of COGCC Date: _____

API NUMBER

05 045 10469 00

Permit Number: _____ Expiration Date: _____

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.

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)

BMP

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

Total: 0 comment(s)