

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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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: Howard Harris
2. Name of Operator: Williams Production RMT Company LLC
3. Address: 1001 17th St., Suite 1200 City: Denver State: CO Zip: 80202 Phone: 303-629-4086 Fax: 303-629-8268
5. API Number: 05-045-11968-00 OGCC Facility ID Number:
6. Well/Facility Name: Williams 7. Well/Facility Number: PA 13-6
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): NESE Sec 1 T7S-R95W
9. County: Garfield 10. Field Name: Parachute
11. Federal, Indian or State Lease Number:

Complete the Attachment Checklist

OP OGCC

Table with 2 columns: Attachment Name, Status. Rows: Survey Plat, Directional Survey, Surface Eqpm Diagram, Technical Info Page, Other.

General Notice

CHANGE OF LOCATION: Attach New Survey Plat (a change of surface qtr/qtr 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/Qtr, 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:
Ground Elevation: Distance to nearest well same formation: Surface owner consultation date:

GPS DATA: Date of Measurement: PDOP Reading: Instrument Operator's Name:

CHANGE SPACING UNIT: Formation, Formation Code, Spacing order number, Unit Acreage, Unit configuration. Remove from surface bond: Signed surface use agreement attached.

CHANGE OF OPERATOR (prior to drilling): Effective Date: Plugging Bond: Blanket Individual. CHANGE WELL NAME: From: To: Effective Date: NUMBER

ABANDONED LOCATION: Was location ever built? Yes No. Is site ready for inspection? Yes No. Date Ready for Inspection: NOTICE OF CONTINUED SHUT IN STATUS: Date well shut in or temporarily abandoned: Has Production Equipment been removed from site? Yes No. MIT required if shut in longer than two years. Date of last MIT:

SPUD DATE: REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)

SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK: Method used, Cementing tool setting/perf depth, Cement volume, Cement top, Cement bottom, Date. \*submit cbl and cement job summaries

RECLAMATION: Attach technical page describing final reclamation procedures per Rule 1004. Final reclamation will commence on approximately: Final reclamation is completed and site is ready for inspection.

Technical Engineering/Environmental Notice

Notice of Intent: Approximate Start Date: 3/5/12. Report of Work Done: Date Work Completed:

Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)

Intent to Recomplete (submit form 2), Change Drilling Plans, Gross Interval Changed?, Casing/Cementing Program Change, Request to Vent or Flare, Repair Well, Rule 502 variance requested, Other: Squeeze Casing Leak, E&P Waste Disposal, Beneficial Reuse of E&P Waste, 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: Howard Harris Date: 3/1/12 Email: Howard.Harris@Williams.com Print Name: Howard Harris Title: Sr. Regulatory Specialist

COGCC Approved: [Signature] Title: NWAE Date: 3/2/12

CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

RECEIVED  
MAR 01 2012  
COGCC/Rifle Office

1. OGCC Operator Number: 96850 API Number: 05-045-11968-00  
 2. Name of Operator: Williams Production RMT Company LLC OGCC Facility ID #  
 3. Well/Facility Name: Williams Well/Facility Number: PA 13-6  
 4. Location (Qtr, Sec, Twp, Rng, Meridian): NESE Sec 1 T7S-R95W

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.

DESCRIBE PROPOSED OR COMPLETED OPERATIONS

While fishing out a stuck plug, the subject well developed a casing leak. Williams requests permission to remediate casing leak in accordance with following procedure: Verbal approval was given 3/1/12 by Mr. Kevin King with the COGCC to proceed with the work.

**WPXENERGY** Exploration and Production  
Water Squeeze Procedure

Wellname: PA 13-6  
Location: NESE 1-7S-96W  
Field: Grand Valley  
API: 05-045-11968

Prepared By: Ryan Olson  
cell phone: (970)987-4603

Date: 3/1/12

Surface Casing: 9-5/8" 32.3# set @ 1,134-ft  
 Production Casing: 4-1/2" 11.6# set @ 6,780-ft  
 PBD: 6,754-ft  
 TOC: 3,270-ft  
 Tubing: 2-3/8" tbg @ 6,188-ft  
 MV Completions: Lower Cameo through MV 4 (5,007 - 6,661-ft)  
 Correlate Log: Halliburton CH - 4/19/06

Purpose: Remediate casing leak between 2460' and 2475' by squeezing with cement

Proposed Procedure:

- 1 POOH w/ 2-3/8" tbg
- 2 RIH set RBP @ 2675' and cement retainer @ 2360'
- 3 Pump 350 sks of 15.8# and 50 sks of 17# Class G cement
- 4 POOH w/ down hole equipment
- 5 Drill out cement retainer and cement. Test squeeze to 1500 psi
- 6 Run CBL from 3400' to surface (or new TOC)
- 7 Submit subsequent report