



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.)

RECEIVED

FEB 07 2012

COGCC/Rifle Office

1. OGCC Operator Number: 96850
2. Name of Operator: Williams Production RMT Company LLC
3. Address: 1001 17th Street, Suite 1200
City: Denver State: CO Zip: 80202

4. Contact Name: Greg Davis
Phone: (303) 606-4071
Fax: (303) 629-8268

Complete the Attachment
Checklist

OP OGCC

5. API Number 05-045-10860-00 OGCC Facility ID Number
6. Well/Facility Name: Federal 7. Well/Facility Number GM 521-4
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): NENW 4-T7S-96W
9. County: Garfield 10. Field Name: Grand Valley
11. Federal, Indian or State Lease Number:

Survey Plat		
Directional Survey		
Surface Eqpm Diagram		
Technical Info Page	X	
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:

	FNL/FSL		FEL/FWL
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Change of Surface Footage to Exterior Section Lines:

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Change of Bottomhole Footage from Exterior Section Lines:

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Change of Bottomhole Footage to Exterior Section Lines:

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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:

attach directional survey

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

NUMBER

From:

To:

Effective Date:

☐ ABANDONED LOCATION:Was location ever built? ☐ Yes ☐ NoIs 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

*submit cbl and cement job summaries

Method used Cementing tool setting/perf depth Cement volume Cement top Cement bottom Date

☐ 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:

☐ 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)☐ Request to Vent or Flare☐ E&P Waste Disposal☐ Change Drilling Plans☐ Repair Well☐ Beneficial Reuse of E&P Waste☐ Gross Interval Changed?☐ Rule 502 Variance requested☐ Status Update/Change of Remediation Plans☐ Casing/Cementing Program Change☒ Other: Cmt Squeeze

for Spills and Releases

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

Signed: Greg DavisDate: 2/7/12 Email: Greg.J.Davis@Williams.comPrint Name: Greg DavisTitle: Supervisor PermitsCOGCC Approved: [Signature]Title: NWAEDate: 5/16/12

CONDITIONS OF APPROVAL, IF ANY:

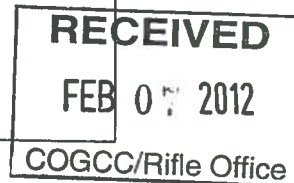
TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

1. OGCC Operator Number:	96850	API Number:	05-045-10860-00
2. Name of Operator:	Williams Production RMT Company LLC OGCC Facility ID #		
3. Well/Facility Name:	Federal	Well/Facility Number:	GM 521-4
4. Location (QtrQtr, Sec, Twp, Rng, Meridian):	NENW Sec 4 T7S-R96W		

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

WPX ENERGY Exploration and Production
Water Squeeze Procedure

Wellname: **GM 521-4**
Location: **NENW 4-7S-96W**
Field: **Grand Valley**
API: **05-045-10860**

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

Date: 2/7/12

Surface Casing: 9-5/8" 32.3# set @ 1,128-ft
Production Casing: 4-1/2" 11.6# set @ 6,425-ft
PBTD: 6,270-ft
TOC: 2,280-ft
Tubing: 2-3/8" tbg @ 5,914-ft
MV Completions: MV/Cameo (4,613 - 6,053-ft)
Correlate Log: Halliburton CBL - 10/18/05

Purpose: Identify and isolate high water producing zone

Proposed Procedure:

- 1 POOH w/ 2-3/8" tbg
- 2 RIH set RBP and packer and identify high water producing zone
- 3 POOH w/ packer and tubing
- 4 RIH and remediate high water producing zone with Class G cement
- 5 POOH w/ down hole equipment
- 6 Drill out cement and test to 1000 psi
- 7 RIH with tubing and return to production