

FORM
2

Rev
12/05

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

APPLICATION FOR PERMIT TO:

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

2. TYPE OF WELL

OIL GAS COALBED OTHER _____
SINGLE ZONE MULTIPLE ZONE COMMINGLE ZONE

Refiling
Sidetrack

Document Number:

1637472

Plugging Bond Surety

20030107

3. Name of Operator: WILLIAMS PRODUCTION RMT COMPANY 4. COGCC Operator Number: 96850

5. Address: 1515 ARAPAHOE ST STE 1000
City: DENVER State: CO Zip: 80202

6. Contact Name: HOWARD HARRIS Phone: (303)606-4086 Fax: (303)629-8272
Email: HOWARD.HARRIS@WILLIAMS.COM

7. Well Name: MAHAFFEY Well Number: PA 321-36

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

9. Proposed Total Measured Depth: 7785

WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 36 Twp: 6S Rng: 95W Meridian: 6

Latitude: 39.488119 Longitude: -107.952560

Footage at Surface: 168 FNL/FSL FNL 1048 FEL/FWL FWL

11. Field Name: PARACHUTE Field Number: 67350

12. Ground Elevation: 5165 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 09/25/2008 PDOP Reading: 6.0 Instrument Operator's Name: K.J. KIRKPATRICK

15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL 589 FNL 1700 FWL FWL Bottom Hole: FNL/FSL 589 FNL 1700 FWL FWL
Sec: 36 Twp: 6S Rng: 95W Sec: 36 Twp: 6S Rng: 95W

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: 286 ft

18. Distance to nearest property line: 228 ft 19. Distance to nearest well permitted/completed in the same formation: 335 ft

20. 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	139-64	320	N2

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 Bon \$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: 589 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 27 or 28 are yes, is this location in a sensitive area (Rule 903)? Yes No **If 28, 29, or 30 are "Yes" a pit permit may be required.**

31. Mud disposal: Offsite Onsite

Method: Land Farming Land Spreading Disposal Facility Other: RE-USE & EVAP & BACKFI

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	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bottom	Cement Top
CONDUCTOR	24	18	48	45	25	45	0
SURF	13+1/2	9+5/8	32.3	800	526	800	0
1ST	7+7/8	4+1/2	11.6	7,785	612	7,785	

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

33. Comments LOCATION IS NOT IN A RSO, PAD IS BUILT, THERE WILL BE NO ADDITIONAL DISTURBANCE, NO RIG ON LOCATION. THERE HAVE BEEN NO CHANGES TO SURFACE USE, LEASE CONDITIONS, OR DRILLING PLANS SINCE THE ORIGINAL FORM 2 WAS SUBMITTED EXCEPT FOR SUNDRY TO CHANGE SURFACE CASING DEPTH WHICH WAS APPROVED 9/4/09. CLOSED MUD SYSTEM. CUTTINGS PIT IS BUILT.

34. Location ID: 383329

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 REG SPEC Date: 10/27/2009 Email: HOWARD.HARRIS@WILLIAM

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: 12/23/2009

Permit Number: _____ Expiration Date: 12/22/2010

API NUMBER
05 045 18275 00

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.

24 HOUR SPUD NOTICE REQUIRED. E-MAIL: david.andrews@state.co.us GARFIELD COUNTY RULISON FIELD NOTICE TO OPERATORS. NOTE: ALL NOTICES SHALL BE GIVEN VIA E-MAIL. SEE ATTACHED NOTICE CEMENT TOP VERIFICATION BY CBL REQUIRED. OPERATOR MUST ENSURE 110 PERCENT SECONDARY CONTAINMENT FOR ANY VOLUME OF FLUIDS CONTAINED AT WELL SITE DURING DRILLING AND COMPLETION OPERATIONS. IF FLUIDS ARE CONVEYED VIA PIPELINE, OPERATOR MUST IMPLEMENT BEST MANAGEMENT PRACTICES TO CONTAIN ANY UNINTENTIONAL RELEASE OF FLUIDS. FLOWBACK TO TANKS ONLY. SUBMIT A SECONDARY AND TERTIARY CONTAINMENT PLAN VIA SUNDRY NOTICE FORM 4 FOR THE TANKS. ATTN: CHRIS CANFIELD. OBTAIN APPROVAL OF THE PLAN PRIOR TO FLOWBACK. THE MOISTURE CONTENT OF ANY DRILL CUTTINGS IN A CUTTINGS PIT, TRENCH, OR PILE SHALL BE AS LOW AS PRACTICABLE TO PREVENT ACCUMULATION OF LIQUIDS GREATER THAN DE MINIMIS AMOUNTS. AT THE TIME OF CLOSURE, THE DRILL CUTTINGS MUST ALSO MEET THE APPLICABLE STANDARDS OF TABLE 910-1. THE PROPOSED SURFACE CASING IS MORE THAN 50' BELOW THE DEPTH OF THE DEEPEST WATER WELL WITHIN 1MILE OF THE SURFACE LOCATION WHEN CORRECTED FOR ELEVATION DIFFERENCES. THE DEEPEST WATER WELL WITHIN 1 MILE IS 220 FEET DEEP.

Attachment Check List

Att Doc Num	Name	Doc Description
1637472	APD ORIGINAL	LF@2166422 1637472
400012115	FORM 2 SUBMITTED	LF@2179585 400012115

Total Attach: 2 Files