

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
----	----	----	----

Document Number:

2585370

Plugging Bond Surety

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 ☐

3. Name of Operator: WILLIAMS PRODUCTION RYAN GULCH LLC

4. COGCC Operator Number: 10286

5. Address: 1515 ARAPAHOE ST TWR 3 STE 1000

City: DENVER State: CO Zip: 80202

6. Contact Name: JENNIFER HEARD Phone: (303)606-4342 Fax: (303)629-8275

Email: JENNIFER.HEAD@WILLIAMS.COM

7. Well Name: FEDERAL RG Well Number: 12-5-397

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

9. Proposed Total Measured Depth: 12207

WELL LOCATION INFORMATION

10. QtrQtr: SENW Sec: 5 Twp: 3S Rng: 97W Meridian: 6

Latitude: 39.819184 Longitude: -108.306665

FNL/FSL

FEL/FWL

Footage at Surface: 2308 FNL 2263 FWL

11. Field Name: SULPHUR CREEK Field Number: 80090

12. Ground Elevation: 6645.5 13. County: RIO BLANCO

14. GPS Data:

Date of Measurement: 09/11/2008 PDOP Reading: 2.4 Instrument Operator's Name: MARK BESSIE

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

2100 FNL 708 FWL 2100 FNL 708 FWL

Sec: 5 Twp: 3S Rng: 97W Sec: 5 Twp: 3S Rng: 97W

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: 220 ft

18. Distance to nearest property line: 924 ft 19. Distance to nearest well permitted/completed in the same formation: 1315 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.)
ILES	ILES			
SEGO	SEGO			
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 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 LEASE MAP

25. Distance to Nearest Mineral Lease Line: 3331 ft 26. Total Acres in Lease: 1590

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: SEE ATTACHED LEASE MA

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	80	135	80	
SURF	14+3/4	9+5/8	36	3,707	3	3,707	
1ST	8+3/4	4+1/2	11.6	12,207		12,207	

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

33. Comments CEMENT WILL BE CIRCULATED TO THE SURFACE IN THE CONDUCTOR STRING. CEMENT WILL BE CIRCULATED TO 200' ABOVE THE UPPERMOST MESAVERDE SNAD IN THE PRODUCTION STRING. LOCATION CONSTRUCTED TO BE EXPANDED. NEW DRILLING PITS WILL BE CONSTRUCTED. DERRICK HEIGHT IS 142'.

34. Location ID: 315608

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: JENNIFER HEAD

Title: REGULATORY SPECIALIST Date: _____ Email: JENNIFER.HEAD@WILLIAMS.

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: _____

Permit Number: _____ Expiration Date: _____

API NUMBER

05

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	Doc Description
2098628	SELECTED ITEMS REPORT	LF@2204566 2098628
2098629	ACCESS ROAD MAP	LF@2204832 2098629
2098630	ACCESS ROAD MAP	LF@2204831 2098630
2585370	APD ORIGINAL	LF@2204560 2585370
2585371	WELL LOCATION PLAT	LF@2204561 2585371
2585372	TOPO MAP	LF@2204829 2585372
2585373	LOCATION PICTURES	LF@2204828 2585373
2585374	ACCESS ROAD MAP	LF@2204830 2585374
2585376	DEVIATED DRILLING PLAN	LF@2204562 2585376
2585377	FED. DRILLING PERMIT	LF@2204563 2585377
2585379	DRILLING COMPLETION REPORT	LF@2204564 2585379
2585380	SURFACE PLAN	LF@2204565 2585380
2585382	MINERAL LEASE MAP	LF@2204567 2585382

Total Attach: 13 Files