

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



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Document Number:
2093647
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 RMT COMPANY 4. COGCC Operator Number: 96850
5. Address: 1515 ARAPAHOE ST STE 1000
City: DENVER State: CO Zip: 80202
6. Contact Name: GREG DAVIS Phone: (303)606-4071 Fax: (303)629-8272
Email: GREG.J.DAVIS@WILLIAMS.COM
7. Well Name: WRIGHT, CASTEEL AND SMALLWOOD Well Number: SG 433-28
8. Unit Name (if appl): _____ Unit Number: _____
9. Proposed Total Measured Depth: 5108

WELL LOCATION INFORMATION

10. QtrQtr: SWSE Sec: 28 Twp: 7S Rng: 96W Meridian: 6
Latitude: 39.404594 Longitude: -108.110569
Footage at Surface: 1252 FNL/FSL FSL 1518 FEL/FWL FEL
11. Field Name: GRAND VALLEY Field Number: 31290
12. Ground Elevation: 5092 13. County: GARFIELD

14. GPS Data:
Date of Measurement: 07/29/2009 PDOP Reading: 1.9 Instrument Operator's Name: ROBERT KAY

15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**
Footage at Top of Prod Zone: FNL/FSL 1652 FSL 2057 FEL/FWL 1652 FSL 2057 FEL/FWL
Sec: 28 Twp: 7S Rng: 96W Sec: 28 Twp: 7S Rng: 96W

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: 337 ft
18. Distance to nearest property line: 37 ft 19. Distance to nearest well permitted/completed in the same formation: 255 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	510-20		UNSPACED

21. Mineral Ownership: Fee State Federal Indian Lease #: COC58673

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: 334 ft 26. Total Acres in Lease: 1308

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: EVAPORATION & BACKFIL

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	641	225	641	0
1ST	7+7/8	4+1/2	11.6	5,108	520	5,108	

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

33. Comments SEMI-CLOSED LOOP. SEE WILLIAMS PRODUCTION RMT COMPANY MASTER APD, STANDARD OPERATING PRACTICES VERSION: APRIL 27,2006 FOR DRILLING PLAN AND SURFACE USE PLAN.

34. Location ID: 334397

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: GREG DAVIS

Title: SUPERVISOR PERMITS Date: _____ Email: GREG.J.DAVIS@WILLIAMS.C

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
2093647	APD ORIGINAL	LF@2206023 2093647
2093648	WELL LOCATION PLAT	LF@2206024 2093648
2093649	TOPO MAP	LF@2206025 2093649
2093650	OIL & GAS LEASE	LF@2206026 2093650
2093651	SURFACE AGRMT/SURETY	LF@2206027 2093651
2093652	DEVIATED DRILLING PLAN	LF@2206028 2093652
2093653	EXCEPTION LOC REQUEST	LF@2206029 2093653
2093654	EXCEPTION LOC WAIVERS	LF@2206030 2093654
2093655	FED. DRILLING PERMIT	LF@2206031 2093655
2093656	CONST. LAYOUT DRAWINGS	LF@2206032 2093656
2093657	DRILLING PLAN	LF@2206033 2093657
2093658	HYDROLOGY MAP	LF@2206034 2093658
2093659	LOCATION PICTURES	LF@2205936 2093659
2093660	LOCATION PICTURES	LF@2205937 2093660
2093661	LOCATION PICTURES	LF@2205938 2093661
2093662	REFERENCE AREA MAP	LF@2206035 2093662

Total Attach: 16 Files