

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:

2094896

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

7. Well Name: SAVAGE Well Number: RWF 433-29

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

9. Proposed Total Measured Depth: 7780

WELL LOCATION INFORMATION

10. QtrQtr: NESE Sec: 29 Twp: 6S Rng: 94W Meridian: 6

Latitude: 39.494590 Longitude: -107.904651

Footage at Surface: 2023 FNL/FSL 668 FEL/FWL FSL FEL

11. Field Name: RULISON Field Number: 75400

12. Ground Elevation: 5292 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 08/13/2009 PDOP Reading: 6.0 Instrument Operator's Name: J. KIRKPATRICK

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
2049 FSL 1701 FEL 2049 FSL 1701 FEL
Sec: 29 Twp: 6S Rng: 94W Sec: 29 Twp: 6S Rng: 94W

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: 1166 ft

18. Distance to nearest property line: 1285 ft 19. Distance to nearest well permitted/completed in the same formation: 316 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	S/2

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: 570 ft 26. Total Acres in Lease: 1585

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

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	1,112	388	1,112	0
1ST	7+7/8	4+1/2	11.6	7,780	624	7,780	

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

33. Comments FEE SURFACE, FEE MINERALS. CLOSED LOOP MUD SYSTEM. THERE WILL BE TOTAL OF 12 WELLS DRILLED FROM PAD, 7 EXISTING AND 5 ADDITIONAL.

34. Location ID: 335243

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: REGULATORY Date: _____ 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: _____ Director of COGCC Date: _____

API NUMBER	Permit Number: _____	Expiration Date: _____
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
2094896	APD ORIGINAL	LF@2218102 2094896
2094897	WELL LOCATION PLAT	LF@2218103 2094897
2094898	TOPO MAP	LF@2218104 2094898
2094899	OIL & GAS LEASE	LF@2218105 2094899
2094900	SURFACE AGRMT/SURETY	LF@2218106 2094900
2094901	DEVIATED DRILLING PLAN	LF@2218107 2094901
2094902	CONST. LAYOUT DRAWINGS	LF@2218108 2094902
2094903	HYDROLOGY MAP	LF@2218109 2094903
2094904	LOCATION DRAWING	LF@2218110 2094904
2094905	LOCATION PICTURES	LF@2218061 2094905
2094906	LOCATION PICTURES	LF@2218062 2094906
2094907	LOCATION PICTURES	LF@2218063 2094907
2094908	REFERENCE AREA MAP	LF@2218111 2094908

Total Attach: 13 Files