

## State of Colorado

## Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)894-2100 Fax: (303)894-2109

## 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.)

1. OGCC Operator Number:	96850	4. Contact Name	Greg Davis
2. Name of Operator:	Williams Production RMT Co.	Phone:	(303) 606-4071
3. Address: 1515 Arapahoe St., Tower 3, Suite 1000		Fax:	(303) 629-8272
City:	Denver	State:	CO
Zip:	80202		
5. API Number	05-045-17819-00	OGCC Facility ID Number	
6. Well/Facility Name:	Williams	Well/Facility Number	GM 443-32
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian):	SENE 32-T6S-96W		
9. County:	Garfield	10. Field Name:	Grand Valley
11. Federal, Indian or State Lease Number:			

## General Notice

<input type="checkbox"/> 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
Change of Surface Footage to Exterior Section Lines:		
Change of Bottomhole Footage from Exterior Section Lines:		
Change of Bottomhole Footage to Exterior Section Lines:		
Bottomhole location Qtr/Qtr, Sec, Twp, Rng, Mer		attach directional survey
Latitude		Distance to nearest bldg, public rd, utility or RR
Longitude		Is location in a High Density Area (rule 603b)?
Ground Elevation		Surface owner consultation date:

## 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:

☐ CHANGE WELL NAME

From:

Plugging Bond: ☐ Blanket ☐ Individual

To:

Effective Date:

NUMBER

☐ ABANDONED LOCATION:

Was location ever built?

☐ Yes ☐ No

Is 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

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

\*submit cbi and cement job summaries  
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:

for Spills and Releases

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

Signed:

Date: 3/1/10 Email: Greg.J.Davis@Williams.com

Print Name:

Title: Supervisor Permits

COGCC Approved:

Keith J. Kij

Title EIT III

Date: MAR 11 2010

CONDITIONS OF APPROVAL, IF ANY:



02577053



DE

EF

EG

ES

RECEIVED

MAR 11 2010

COGCC/Rifle Office

Complete the Attachment  
Checklist

OP

OGCC

Survey Plat	
Directional Survey	
Surface Exgmt Diagram	
Technical info Page	X
Other	

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

RECEIVED

MAR 11 2010

OGCC/Rifle Office

1. OGCC Operator Number:	96850	API Number:	05-045-17819-00
2. Name of Operator:	Williams Production RMT Co OGCC Facility ID #		
3. Well/Facility Name:	Williams	Well/Facility Number:	GM 443-32
4. Location (QtrQtr, Sec, Twp, Rng, Meridian):	SENE Sec 32 T6S-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

Williams requests permission to reduce the permitted 32.3# 9 5/8" sfc csg depth from 805' (MD) to: 704' (MD) set with 420 sx cmt.