

State of Colorado
Oil and Gas Conservation Commission
SUNDRY NOTICE

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



RECEIVED
MAR 11 2010
COGCC/Rifle Office

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
 2. Name of Operator: Williams Production RMT Co.
 3. Address: 1515 Arapahoe St., Tower 3, Suite 1000
 City: Denver State: CO Zip: 80202
 4. Contact Name: Greg Davis
 Phone: (303) 806-4071
 Fax: (303) 629-8272
 5. API Number 05-045-17824-00
 6. Well/Facility Name: Williams
 7. Well/Facility Number: GM 444-32
 8. Location (Ctr/Qt, Sec, Twp, Rng, Meridian): SENE 32-T6S-96W
 9. County: Garfield
 10. Field Name: Grand Valley
 11. Federal, Indian or State Lease Number:

Complete the Attachment Checklist

OP OGCC

Survey Plat	
Directional Survey	
Surface Eqpmnt Diagram	
Technical Info Page	X
Other	

General Notice

CHANGE OF LOCATION: Attach New Survey Plat (a change of surface ctr/qrt is substantive and requires a new permit)

FNL/FSL		FEL/FWL	

Change of Surface Footage from Exterior Section Lines: attach directional survey

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 Ctr/Qt, Sec, Twp, Rng, Mer

Latitude _____ Distance to nearest property line _____ Distance to nearest bldg, public rd, utility or RR _____
 Longitude _____ Distance to nearest lease line _____ Is location in a High Density Area (rule 603b)? Yes/No _____
 Ground Elevation _____ Distance to nearest well same formation _____ Surface owner consultation date: _____

GPS DATA:
 Date of Measurement _____ PDOP Reading _____ Instrument Operator's Name _____

CHANGE SPACING UNIT
 Formation _____ Spacing order number _____ Unit Acreage _____ Unit configuration _____
 Remove from surface bond
 Signed surface use agreement attached

CHANGE OF OPERATOR (prior to drilling):
 Effective Date: _____
 Plugging Bond: Blanket Individual
 CHANGE WELL NAME
 From: _____ 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 top _____ Cement bottom _____ Date _____
 *submit cbl and cement job summaries

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.

Notice of Intent
 Approximate Start Date: _____
 Report of Work Done _____
 Date Work Completed: _____
 Technical Engineering/Environmental Notice

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: *Greg Davis* Date: 3/11/10 Email: Greg.J.Davis@Williams.com
 Print Name: Greg Davis Title: Supervisor Permits

COGCC Approved: *Kevin J. Kij* Title: EIT III Date: MAR 11 2010
 CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

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2. Name of Operator: Williams Production RMT Co OGCC Facility ID #
3. Well/Facility Name: Williams Well/Facility Number: GM 444-32
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 1090' (MD) to: 766' (MD) set with 455 sx cmt.