

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:
2581191
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 HEAD Phone: (303)606-4342 Fax: (303)629-8275
Email: JENNIFER.HEAD@WILLIAMS.COM

7. Well Name: FEDERFAL RG Well Number: 531-16-397

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

9. Proposed Total Measured Depth: 12360

WELL LOCATION INFORMATION

10. QtrQtr: NWNE Sec: 16 Twp: 3S Rng: 97W Meridian: 6
Latitude: 39.792908 Longitude: -108.280582

Footage at Surface: 1276 FNL/FSL FNL 1467 FEL/FWL FEL

11. Field Name: SULPHUR CREEK Field Number: 80090

12. Ground Elevation: 6946.1 13. County: RIO BLANCO

14. GPS Data:

Date of Measurement: 10/20/2008 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 FNL 2018 FEL Bottom Hole: FNL/FSL FNL 2018 FEL
1331 FNL 2018 FEL 1331 FNL 2018 FEL
Sec: 16 Twp: 3S Rng: 97W Sec: 16 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: _____ mi

18. Distance to nearest property line: 2970 ft 19. Distance to nearest well permitted/completed in the same formation: 1680 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 #: COC008313

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):
T3S, R97W, SEC. 16: ALL; SEC. 17: W/2NE, W/2, SESE

25. Distance to Nearest Mineral Lease Line: 1331 ft 26. Total Acres in Lease: 1080

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	80	135	80	0
SURF	14+3/4	9+5/8	36	3,690		3,690	0
1ST	8+3/4	4+1/2	11.6	12,360		12,360	

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 SAND IN THE PRODUCTION STRING. THE PAD HAS BEEN CONSTRUCTED. THERE WAS NO PAD EXPANSION NEEDED. THE PAD IS NOT LOCATED IN A RSO AREA. THERE IS NOT A RIG ON LOCATION.**

34. Location ID: 413635

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 Date: 2/11/2010 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: _____

API NUMBER 05 103 11518 00	Permit Number: _____ Expiration Date: _____
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
2581191	APD ORIGINAL	LF@2434949 2581191
400047514	FORM 2 SUBMITTED	400047514.pdf

Total Attach: 2 Files