

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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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

Document Number:
2585405
Plugging Bond Surety
20030107

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: FEDERAL RG Well Number: 532-5-397

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

9. Proposed Total Measured Depth: 12307

WELL LOCATION INFORMATION

10. QtrQtr: SENW Sec: 5 Twp: 3S Rng: 97W Meridian: 6
Latitude: 39.819147 Longitude: -108.306687

Footage at Surface: 2321 FNL/FSL FNL 2256 FEL/FWL FWL

11. Field Name: SULPHUR CREEK Field Number: 80090

12. Ground Elevation: 6647.8 13. County: RIO BLANCO

14. GPS Data:

Date of Measurement: 09/11/2008 PDOP Reading: 2.4 Instrument Operator's Name: MARK DESSIE

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
2434 FNL 2088 FEL 2434 FNL 2088 FEL
Sec: 5 Twp: 3S Rng: 97W Sec: 5 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: 220 ft

18. Distance to nearest property line: 924 ft 19. Distance to nearest well permitted/completed in the same formation: 1379 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 #: _____

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):
LEASE MAP SUBMITTED WITH ORIGINAL APD.

25. Distance to Nearest Mineral Lease Line: 2877 ft 26. Total Acres in Lease: 1590

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	3,725		3,725	0
1ST	8+3/4	4+1/2	11.6	12,307		12,307	

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. LOCATION CONSTRUCTED. TO BE EXPANDED. NEW DRILLING PITS WILL BE CONSTRUCTD. NOTE NEW BHL LOCATION AND TD SHIFT. DERRICK HEIGHT IS 142'.**

34. Location ID: 315608

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 SPECIALIST Date: 12/22/2009 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: David S. Neslin Director of COGCC Date: 3/2/2010

API NUMBER: **05 103 11507 00** Permit Number: _____ Expiration Date: 2/29/2012

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.

1)24 HOUR SPUD NOTICE REQUIRED. E-MAIL: Shaun.Kellerby@state.co.us 2)CEMENT TOP VERIFICATION BY CBL REQUIRED. 3)THE PROPOSED SURFACE CASING IS MORE THAN 50' BELOW THE DEPTH OF THE DEEPEST WATER WELL WITHIN 1MILE OF THE SURFACE LOCATION WHEN CORRECTED FOR ELEVATION DIFFERENCES. THE DEEPEST WATER WELL WITHIN 1 MILE IS 000 FEET DEEP.

Attachment Check List

Att Doc Num	Name	Doc Description
2585406	WELL LOCATION PLAT	LF@2204569 2585406
2585407	DEVIATED DRILLING PLAN	LF@2204570 2585407
2585408	MINERAL LEASE MAP	LF@2204571 2585408
400025094	FORM 2 SUBMITTED	LF@2209063 400025094
400046439	APD ORIGINAL	LF@2204568 400046439

Total Attach: 5 Files