

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

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:

400065177

Plugging Bond Surety

20030107

3. Name of Operator: WILLIAMS PRODUCTION RMT COMPANY 4. COGCC Operator Number: 968505. Address: 1515 ARAPAHOE ST STE 1000City: DENVER State: CO Zip: 802026. Contact Name: Greg Davis Phone: (303)606-4071 Fax: (303)629-8272Email: Greg.J.Davis@Williams.com7. Well Name: Williams Well Number: GM 521-33

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

9. Proposed Total Measured Depth: 6983

WELL LOCATION INFORMATION

10. QtrQtr: NWNW Sec: 33 Twp: 6S Rng: 96W Meridian: 6Latitude: 39.484692 Longitude: -108.122006Footage at Surface: 1136 FNL/FSL FNL 238 FEL/FWL FWL11. Field Name: Grand Valley Field Number: 3129012. Ground Elevation: 5725 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 07/15/2008 PDOP Reading: 1.3 Instrument Operator's Name: Robert Kay15. 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 _____

1201 FNL 1454 FWL 1201 FNL 1454 FWLSec: 33 Twp: 6S Rng: 96W Sec: 33 Twp: 6S Rng: 96W16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 3665 ft18. Distance to nearest property line: 2400 ft 19. Distance to nearest well permitted/completed in the same formation: 300 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	510-8	160	NW/4

21. Mineral Ownership: Fee State Federal Indian Lease #: CA
COC50794

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):
T6S-R96W: Sec 29: SESE; Sec 33: N/2NW.SENW, SE; Sec 34: SW; T7S-R96W: Sec 4: Lot 1

25. Distance to Nearest Mineral Lease Line: 165 ft 26. Total Acres in Lease: 423

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 and evaporation

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#	745	275	745	0
1ST	7+7/8	4+1/2	11.6#	6,983	550	6,983	

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

33. Comments Closed Loop. Cement 200' above uppermost mvrnd sand. There have been no changes to lease conditions or drilling plans since the original Form 2 was filed. No rig on location. Location and pits have been built. No pad expansion is necessary. Not in an RSO. Williams owns the surface.

34. Location ID: 335472

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: Greg Davis

Title: Supervisor Permits Date: _____ Email: Greg.J.Davis@Williams.com

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: _____
Permit Number: _____ Expiration Date: _____

API NUMBER

05 045 17486 00

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.