

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:
 400055664
 Plugging Bond Surety
 20030107

3. Name of Operator: WILLIAMS PRODUCTION RMT COMPANY 4. COGCC Operator Number: 96850

5. Address: 1515 ARAPAHOE ST STE 1000
 City: DENVER State: CO Zip: 80202

6. Contact Name: Howard Harris Phone: (303)606-4086 Fax: (303)629-8272
 Email: howard.harris@williams.com

7. Well Name: Holl Well Number: RWF 323-31

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

9. Proposed Total Measured Depth: 7892

WELL LOCATION INFORMATION

10. QtrQtr: NWSW Sec: 31 Twp: 6S Rng: 94W Meridian: 6
 Latitude: 39.480018 Longitude: -107.934262

Footage at Surface: 2141 ^{FNL/FSL} FSL 1027 ^{FEL/FWL} FWL

11. Field Name: Rulison Field Number: 75400

12. Ground Elevation: 5351 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 08/15/2008 PDOP Reading: 5.9 Instrument Operator's Name: J. Kirkpatrick

15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: ^{FNL/FSL} 1963 ^{FEL/FWL} FSL 1629 ^{FNL/FSL} 1963 ^{FEL/FWL} FSL 1629 ^{FNL/FSL} 1963 ^{FEL/FWL} FSL 1629 ^{FNL/FSL} 1963 ^{FEL/FWL} FSL 1629 ^{FNL/FSL} 1963 ^{FEL/FWL} FSL 1629 ^{FNL/FSL} 1963 ^{FEL/FWL} FSL 1629
 Sec: 31 Twp: 6S Rng: 94W Sec: 31 Twp: 6S Rng: 94W

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: 454 ft

18. Distance to nearest property line: 335 ft 19. Distance to nearest well permitted/completed in the same formation: 719 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	139-83	320	S/2 Fee Pooled

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):
See Attached

25. Distance to Nearest Mineral Lease Line: 620 ft 26. Total Acres in Lease: 55

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, Evaporation & Back

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	1,106	386	1,106	0
1ST	7+7/8	4+1/2	11.6	7,892	621	7,892	4,076

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

33. Comments Closed mud system. Top of cement will be approx. 200' above the top of MEsaverde. Surface use agreement is attached to form 2A.

34. Location ID: _____

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: Howard Harris

Title: Sr. Regulatory Specialist Date: 4/19/2010 Email: howard.harris@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: David S. Nesline Director of COGCC Date: 6/2/2010

API NUMBER: **05 045 19556 00** Permit Number: _____ Expiration Date: 6/1/2012

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) COMPLIANCE WITH THE MOST CURRENT REVISION OF THE NORTHWEST COLORADO NOTIFICATION POLICY IS REQUIRED.

2) GARFIELD COUNTY RULISON FIELD NOTICE TO OPERATORS. NOTE: ALL NOTICES SHALL BE GIVEN VIA E-MAIL. SEE ATTACHED NOTICE

3) CEMENT TOP VERIFICATION BY CBL REQUIRED.

4) THE PROPOSED SURFACE CASING IS MORE THAN 50' BELOW THE DEPTH OF THE DEEPEST WATER WELL WITHIN 1 MILE OF THE SURFACE LOCATION WHEN CORRECTED FOR ELEVATION DIFFERENCES. THE DEEPEST WATER WELL WITHIN 1 MILE IS 290 FEET DEEP.

Attachment Check List

Att Doc Num	Name	Doc Description
400055664	FORM 2 SUBMITTED	LF@2454974 400055664
400056209	DEVIATED DRILLING PLAN	LF@2454975 400056209
400056210	DEVIATED DRILLING PLAN	LF@2454976 400056210
400056212	WELL LOCATION PLAT	LF@2454977 400056212
400056213	LEASE MAP	LF@2454978 400056213

Total Attach: 5 Files