

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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Document Number:

400087234

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 RMT COMPANY

4. COGCC Operator Number: 96850

5. Address: 1515 ARAPAHOE ST STE 1000

City: DENVER State: CO Zip: 80202

6. Contact Name: Matt Barber Phone: (303)606-4385 Fax: (303)629-8268

Email: Matt.Barber@Williams.com

7. Well Name: Federal Well Number: RG 411-14-298

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

9. Proposed Total Measured Depth: 11156

WELL LOCATION INFORMATION

10. QtrQtr: SWNW Sec: 14 Twp: 2s Rng: 98w Meridian: 6

Latitude: 39.880670 Longitude: -108.366808

Footage at Surface: 1607 FNL/FSL FNL 513 FEL/FWL FWL

11. Field Name: Sulphur Creek Field Number: 80090

12. Ground Elevation: 6555 13. County: RIO BLANCO

14. GPS Data:

Date of Measurement: 02/16/2010 PDOP Reading: 1.5 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 FEL/FWL Bottom Hole: FNL/FSL FEL/FWL
 510 FNL 649 FWL 510 FNL 649 FWL
 Sec: 14 Twp: 2s Rng: 98w Sec: 14 Twp: 2s Rng: 98w
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: 3500 ft

18. Distance to nearest property line: 2859 ft 19. Distance to nearest well permitted/completed in the same formation: 262 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.)
Sego	SEGO			
Williams & Iles	WFILS	527-6		

21. Mineral Ownership: ☐ Fee ☐ State ☒ Federal ☐ Indian Lease #: COC66586

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):
T2S-R98W 6th PM; State: Colorado; County: Rio Blanco; Sec. 12: Lot 11-16; Sec. 14: Lot 2-7; Sec. 14: SW, W2SE

25. Distance to Nearest Mineral Lease Line: 510 ft 26. Total Acres in Lease: 666

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 & Backfilling

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	26	18	48#	80	135	80	
SURF	14+3/4	9+5/8	36#	3,065		3,065	
3RD	8+3/4	4+1/2	11.6#	11,156		11,156	

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

33. Comments Location constructed, will be expanded. 2A application accompanies this APD

34. Location ID: 335993

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: Matt Barber

Title: Sr. Regulatory Specialist Date: _____ Email: Matt.Barber@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: _____

API NUMBER: 05 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
400087331	WELL LOCATION PLAT	01_RG 411-14-298_CWP.pdf
400087332	TOPO MAP	02-RG 12-14-298_topo map.pdf
400087333	DEVIATED DRILLING PLAN	03_RG 411-14-298_Drilling Plan.pdf
400087345	FED. DRILLING PERMIT	20100823 Fed RG 411-14-298 Fed APD (Scanned).pdf

Total Attach: 4 Files