



02054767

FORM 4 Rev 12/05

Page 1

State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)894-2100 Fax: (303)894-2109



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SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (Page 2 of this form.) Identify well or other facility by API Number or by OGCC Facility ID. Operator shall send an informational copy of all sundry notices for wells located in High Density Areas to the Local Government Designee (Rule 603b.)

1. OGCC Operator Number: 96850 4. Contact Name: Howard Harris
2. Name of Operator: Williams Production RMT Company
3. Address: 1515 Arapahoe St., Tower 3, #1000
5. API Number: 05-045-18832-00 OGCC Facility ID Number
6. Well/Facility Name: Savage 7. Well/Facility Number: PA 344-4
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): SWSE Sec 4 T7S-R95W
9. County: Garfield 10. Field Name: Parachute
11. Federal, Indian or State Lease Number:

Table with 2 columns: Survey Plat, Directional Survey, Surface Eqmpt Diagram, Technical Info Page, Other. Includes checkboxes and 'X' marks.

General Notice

CHANGE OF LOCATION: Attach New Survey Plat (a change of surface qtr/qtr is substantive and requires a new permit)
CHANGE SPACING UNIT
CHANGE OF OPERATOR (prior to drilling):
CHANGE WELL NAME
ABANDONED LOCATION:
NOTICE OF CONTINUED SHUT IN STATUS
SPUD DATE:
REQUEST FOR CONFIDENTIAL STATUS
SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK
RECLAMATION:

Technical Engineering/Environmental Notice

X Notice of Intent Approximate Start Date: 1/1/11
Report of Work Done Date Work Completed:
Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)
Intent to Recomplete (submit form 2)
Request to Vent or Flare
E&P Waste Disposal
Change Drilling Plans
Repair Well
Beneficial Reuse of E&P Waste
Gross Interval Changed?
Rule 502 variance requested
Status Update/Change of Remediation Plans
Casing/Cementing Program Change
Other: for Spills and Releases

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete

Signed: Howard Harris Date: 12/11/10 Email: Howard.Harris@williams.com
Print Name: Howard Harris Title: Sr. Regulatory Specialist

COGCC Approved: David Anderson Title: PE II Date: 12/21/2010

CONDITIONS OF APPROVAL, IF ANY:

FORM
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TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

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| 1. OGCC Operator Number: <u>96850</u> API Number: <u>05-045-18832-00</u> |
| 2. Name of Operator: <u>Williams Production RMT Company</u> OGCC Facility ID # _____ |
| 3. Well/Facility Name: <u>Savage</u> Well/Facility Number: <u>PA 344-4</u> |
| 4. Location (QtrQtr, Sec, Twp, Rng, Meridian): <u>SWSE Sec 4 T7S-R95W</u> |

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within 30 days of work completed as a "subsequent" report and must accompany Form 4, page 1.

DESCRIBE PROPOSED OR COMPLETED OPERATIONS

Williams requests approval to change the 9 5/8" surface casing set depth from 2138' to 1000' TMD. Everything else will remain the same.