

FORM
2A

Rev
04/01

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:
400122672

Oil and Gas Location Assessment

New Location Amend Existing Location Location#: _____

Submit original plus one copy. This form is to be submitted to the COGCC prior to any ground disturbance activity associated with oil and gas development operations. This Assessment may be approved as a stand alone application or submitted as an informational report accompanying an Application for Permit-To-Drill, Form 2. Approval of this Assessment will allow for the construction of the below specified location; however, it does not supersede any land use rules applied by the local land use authority. This form may serve as notice to land owners and other interested parties, please see the COGCC web site at <http://colorado.gov/cogcc/> for all accompanying information pertinent to this Oil and Gas Location Assessment.

Location ID:

Expiration Date:

This location assessment is included as part of a permit application.

1. CONSULTATION

- This location is included in a Comprehensive Drilling Plan. CDP # _____
- This location is in a sensitive wildlife habitat area.
- This location is in a wildlife restricted surface occupancy area.
- This location includes a Rule 306.d.(1)A.ii. variance request.

2. Operator

Operator Number: 96850
 Name: WILLIAMS PRODUCTION RMT COMPANY
 Address: 1515 ARAPAHOE ST STE 1000
 City: DENVER State: CO Zip: 80202

3. Contact Information

Name: Howard Harris
 Phone: (303) 606-4086
 Fax: (303) 606-8268
 email: howard.harris@williams.com

4. Location

Identification:

Name: Federal Number: SP 13-13
 County: GARFIELD
 Quarter: NWSW Section: 13 Township: 7S Range: 95W Meridian: 6 Ground Elevation: 7993

Define a single point as a location reference for the facility location. This point should be used as the point of measurement in the drawings to be submitted with this application. When the location is to be used as a well site then the point shall be a well location.

Footage at surface: 1680 feet FSL, from North or South section line, and 254 feet FWL, from East or West section line.
 Latitude: 39.435037 Longitude: -107.954899 PDOP Reading: 2.0 Date of Measurement: 12/13/2010

Instrument Operator's Name: Michael Langhorn

5. Facilities (Indicate the number of each type of oil and gas facility planned on location):

Special Purpose Pits: Drilling Pits: Wells: Production Pits: Dehydrator Units:
 Condensate Tanks: Water Tanks: Separators: Electric Motors: Multi-Well Pits:
 Gas or Diesel Motors: Cavity Pumps: LACT Unit: Pump Jacks: Pigging Station:
 Electric Generators: Gas Pipeline: Oil Pipeline: Water Pipeline: Flare:
 Gas Compressors: VOC Combustor: Oil Tanks: Fuel Tanks:

Other: Cuttings Trench

6. Construction:

Date planned to commence construction: 04/01/2011 Size of disturbed area during construction in acres: 9.90
Estimated date that interim reclamation will begin: 04/01/2012 Size of location after interim reclamation in acres: 80.80
Estimated post-construction ground elevation: 7993 Will a closed loop system be used for drilling fluids: Yes [X]
Will salt sections be encountered during drilling: Yes [] No [X] Is H2S anticipated? Yes [] No [X]
Will salt (>15,000 ppm TDS Cl) or oil based muds be used: Yes [] No [X]
Mud disposal: Offsite [] Onsite [] Method: Land Farming [] Land Spreading [] Disposal Facility []
Other: re-use, Evap & Backfill

7. Surface Owner:

Name: Bureau of Land Management Phone: 970-876-9000
Address: 2300 River Frontage Road Fax: 970-876-9090
Address: Email:
City: Silt State: CO Zip: 81652 Date of Rule 306 surface owner consultation:
Surface Owner: [] Fee [] State [X] Federal [] Indian
Mineral Owner: [] Fee [] State [X] Federal [] Indian
The surface owner is: [X] the mineral owner [] committed to an oil and gas lease
[] is the executer of the oil and gas lease [] the applicant
The right to construct the location is granted by: [X] oil and gas lease [] Surface Use Agreement [] Right of Way
[] applicant is owner
Surface damage assurance if no agreement is in place: [] \$2000 [] \$5000 [] Blanket Surety ID

8. Reclamation Financial Assurance:

[] Well Surety ID: [] Gas Facility Surety ID: [] Waste Mgnt. Surety ID:

9. Cultural:

Is the location in a high density area (Rule 603.b.): Yes [] No [X]
Distance, in feet, to nearest building: 5601 , public road: 4787 , above ground utilit: 4391
, railroad: 16296 , property line: 1085

10. Current Land Use (Check all that apply):

Crop Land: [] Irrigated [] Dry land [] Improved Pasture [] Hay Meadow [] CRP
Non-Crop Land: [X] Rangeland [] Timber [] Recreational [] Other (describe):
Subdivided: [] Industrial [] Commercial [] Residential

11. Future Land Use (Check all that apply):

Crop Land: [] Irrigated [] Dry land [] Improved Pasture [] Hay Meadow [] CRP
Non-Crop Land: [X] Rangeland [] Timber [] Recreational [] Other (describe):
Subdivided: [] Industrial [] Commercial [] Residential

12. Soils:

List all soil map units that occur within the proposed location. Attach the National Resource Conservation Service (NRCS) report showing the "Map Unit Description" report listing the soil typical vertical profile. This data is to used when segregating topsoil.

The required information can be obtained from the NRCS web site at <http://soildatamart.nrcs.usda.gov/> or from the COGCC web site GIS Online map page found at <http://colorado.gov/cogcc>. Instructions are provided within the COGCC web site help section.

NRCS Map Unit Name: 12 Bucklon-Inchau Loams, 25 to 50 percent slopes

NRCS Map Unit Name: _____

NRCS Map Unit Name: _____

13. Plant Community:

Complete this section only if any portion of the disturbed area of the location's current land use is on non-crop land.

Are noxious weeds present: Yes No

Plant species from: NRCS or, field observation Date of observation: 10/20/2010

List individual species: Oak, Sage, Serviceberry, Juniper

Check all plant communities that exist in the disturbed area.

- Disturbed Grassland (Cactus, Yucca, Cheatgrass, Rye)
- Native Grassland (Bluestern, Grama, Wheatgrass, Buffalograss, Fescue, Oatgrass, Brome)
- Shrub Land (Mahogany, Oak, Sage, Serviceberry, Chokecherry)
- Plains Riparian (Cottonwood, Willow, Aspen, Maple, Poplar, Russian Olive, Tamarisk)
- Mountain Riparian (Cottonwood, Willow, Blue Spruce)
- Forest Land (Spruce, Fir, Ponderosa Pine, Lodgepole Pine, Juniper, Pinyon, Aspen)
- Wetlands Aquatic (Bullrush, Sedge, Cattail, Arrowhead)
- Alpine (above timberline)
- Other (describe): _____

14. Water Resources:

Rule 901.e. may require a sensitive area determination be performed. If this determination is performed the data is to be submitted with the Form 2A.

Is this a sensitive area: No Yes Was a Rule 901.e. Sensitive Areas Determination performed: No Yes

Distance (in feet) to nearest surface water: 698, water well: 6164, depth to ground water: 173

Is the location in a riparian area: No Yes Was an Army Corps of Engineers Section 404 permit filed No Yes

Is the location within a Rule 317B Surface Water Suppl Area buffer zone:

No 0-300 ft. zone 301-500 ft. zone 501-2640 ft. zone

If the location is within a Rule 317B Surface Water Supply Area buffer have all public water supply systems within 15 miles been notified: No Yes

15. Comments:

This location assessment is for the SP 13-13 well pad for which we are permitting 6 wells at this time. The location reference point for this pad is the SP 424-13 well from which point all distances were measured. Reference photos will be provided at a later date. A closed mud system will be used. This location is within the 3 mile radius of Project Rulison and each well is classified as tier 2. The DOE has been notified by letter dated 1/17/2011 which is attached to this form 2A.

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

Signed: _____ Date: _____ Email: howard.harris@williams.com

Print Name: Howard Harris Title: Sr. Regulatory Specialist

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: _____

CONDITIONS OF APPROVAL, IF ANY:

All representations, stipulations and conditions of approval stated in this Form 2A for this location shall constitute representations, stipulations and conditions of approval for any and all subsequent operations on the location unless this Form 2A is modified by Sundry Notice, Form 4 or an Amended Form 2A.

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Attachment Check List

Att Doc Num	Name
400124643	
400124644	
400124645	
400124646	
400124647	
400124648	
400124649	
400124650	
400124651	
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Total Attach: 12 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)

BMP

<u>Type</u>	<u>Comment</u>

Total: 0 comment(s)