

FORM 5A Rev 02/08	State of Colorado Oil and Gas Conservation Commission 1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">DE</td> <td style="width:25%;">ET</td> <td style="width:25%;">OE</td> <td style="width:25%;">ES</td> </tr> </table>	DE	ET	OE	ES
DE	ET	OE	ES				
COMPLETED INTERVAL REPORT			Document Number: 2512639				
The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.							

1. OGCC Operator Number: <u>96850</u>	4. Contact Name: <u>ANNIE SMITH</u>
2. Name of Operator: <u>WILLIAMS PRODUCTION RMT COMPANY LLC</u>	Phone: <u>(303) 6064363</u>
3. Address: <u>1001 17TH STREET - SUITE #1200</u>	Fax: <u>(303) 6298285</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	

5. API Number <u>05-103-11175-00</u>	6. County: <u>RIO BLANCO</u>
7. Well Name: <u>FEDERAL RGU</u>	Well Number: <u>523-33-198</u>
8. Location: QtrQtr: <u>NESW</u> Section: <u>33</u> Township: <u>1S</u> Range: <u>98W</u> Meridian: <u>6</u>	
9. Field Name: <u>SULPHUR CREEK</u> Field Code: <u>80090</u>	

Completed Interval

FORMATION: <u>COZZETTE</u>	Status: <u>PRODUCING</u>
Treatment Date: <u>11/20/2008</u>	Date of First Production this formation: <u>11/20/2008</u>
Perforations Top: <u>10242</u> Bottom: <u>10277</u>	No. Holes: <u>6</u> Hole size: <u>36/100</u>
Provide a brief summary of the formation treatment:	Open Hole: <input type="checkbox"/>
47 GAL 10% HCl ACID, 21975 # 30/50 SAND, 699 BBLs SLICKWATER	
This formation is commingled with another formation: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Test Information:	
Date: <u>01/28/2009</u> Hours: <u>24</u> Bbls oil: <u>0</u> Mcf Gas: <u>2000</u> Bbls H2O: <u>0</u>	
Calculated 24 hour rate:	Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____ GOR: <u>0</u>
Test Method: <u>flowing</u>	Casing PSI: <u>1900</u> Tubing PSI: <u>1375</u> Choke Size: <u>20/64</u>
Gas Disposition: <u>SOLD</u>	Gas Type: <u>DRY</u> BTU Gas: <u>1089</u> API Gravity Oil: <u>57</u>
Tubing Size: <u>4 + 1/2</u> Tubing Setting Depth: <u>10829</u> Tbg setting date: <u>01/19/2009</u> Packer Depth: _____	
Reason for Non-Production:	

Date formation Abandoned: _____ Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, number of sacks cmt _____
Bridge Plug Depth: _____	Sacks cement on top: _____

FORMATION: CORCORAN Status: PRODUCING

Treatment Date: 11/19/2008 Date of First Production this formation: 11/19/2008

Perforations Top: 10310 Bottom: 10609 No. Holes: 40 Hole size: 36/100

Provide a brief summary of the formation treatment: _____ Open Hole:

898 GAL 10% HCl ACID, 151425 # 30/50 SAND, 4834 BBLS SLICKWATER

This formation is commingled with another formation: Yes No

Test Information:

Date: 01/28/2009 Hours: 24 Bbls oil: 0 Mcf Gas: 2000 Bbls H2O: 0

Calculated 24 hour rate: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____ GOR: 0

Test Method: flowing Casing PSI: 1900 Tubing PSI: 1375 Choke Size: 20/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1089 API Gravity Oil: 57

Tubing Size: 4 + 1/2 Tubing Setting Depth: 1082 Tbg setting date: 01/19/2009 Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____

Bridge Plug Depth: _____ Sacks cement on top: _____

FORMATION: SEGO Status: PRODUCING

Treatment Date: 11/20/2008 Date of First Production this formation: 11/20/2008

Perforations Top: 10647 Bottom: 10953 No. Holes: 39 Hole size: 36/100

Provide a brief summary of the formation treatment: _____ Open Hole:

2000 GAL 10% HCl ACID, 215,250# 30/50 SAND, 6748 BBLS SLICKWATER

This formation is commingled with another formation: Yes No

Test Information:

Date: 01/28/2009 Hours: 24 Bbls oil: 0 Mcf Gas: 2000 Bbls H2O: 0

Calculated 24 hour rate: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____ GOR: 0

Test Method: flowing Casing PSI: 1900 Tubing PSI: 1375 Choke Size: 20/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1089 API Gravity Oil: 57

Tubing Size: 4 + 1/2 Tubing Setting Depth: 10829 Tbg setting date: 01/19/2009 Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____

Bridge Plug Depth: _____ Sacks cement on top: _____

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING

Treatment Date: 11/20/2008 Date of First Production this formation: 11/20/2008

Perforations Top: 7885 Bottom: 9856 No. Holes: 181 Hole size: 36/100

Provide a brief summary of the formation treatment: _____ Open Hole:

7,014 GAL 10% HCl ACID: 769,310 # 30/50 SAND: 25,553 BBLS SLICKWATER

This formation is commingled with another formation: Yes No

Test Information:

Date: 01/28/2009 Hours: 24 Bbls oil: 0 Mcf Gas: 2000 Bbls H2O: 0

Calculated 24 hour rate: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____ GOR: 0

Test Method: flowing Casing PSI: 1900 Tubing PSI: 1375 Choke Size: 20/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1089 API Gravity Oil: 57

Tubing Size: 4 + 1/2 Tubing Setting Depth: 10829 Tbg setting date: 01/19/2009 Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____

Bridge Plug Depth: _____ Sacks cement on top: _____

Comment: _____

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

Signed: _____ Print Name: ANNIE SMITH

Title: ENG. TECH Date: 8/30/2010 Email ANNIE.SMITH@ WILLIAMS.COM

Attachment Check List

Att Doc Num	Name
2512639	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)