

FORM
5

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



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Document Number:
2586969

DRILLING COMPLETION REPORT

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

Completion Type Final completion Preliminary completion

1. OGCC Operator Number: 10286 4. Contact Name: JENN MENDOZA
 2. Name of Operator: WILLIAMS PRODUCTION RYAN GULCH LLC Phone: (303) 260-4533
 3. Address: 1515 ARAPAHOE ST TWR 3 STE 1000 Fax: (303) 629-8285
 City: DENVER State: CO Zip: 80202

5. API Number 05-103-11518-00 6. County: RIO BLANCO
 7. Well Name: FEDERFAL RG Well Number: 531-16-397
 8. Location: QtrQtr: NWNE Section: 16 Township: 3S Range: 97W Meridian: 6
 Footage at surface: Distance: 1276 feet Direction: FNL Distance: 1467 feet Direction: FEL
 As Drilled Latitude: 39.792908 As Drilled Longitude: -108.280582

GPS Data:
Data of Measurement: 02/04/2010 PDOP Reading: 1.3 GPS Instrument Operator's Name: RICHARD BULLEN JR

** If directional footage at Top of Prod. Zone Dist.: 1333 feet. Direction: FNL Dist.: 2022 feet. Direction: FWL
 Sec: 16 Twp: 3S Rng: 97W
 ** If directional footage at Bottom Hole Dist.: 1332 feet. Direction: FNL Dist.: 2025 feet. Direction: FWL
 Sec: 16 Twp: 3S Rng: 97W

9. Field Name: SULPHUR CREEK 10. Field Number: 80090
 11. Federal, Indian or State Lease Number: COC008313

12. Spud Date: (when the 1st bit hit the dirt) 07/09/2010 13. Date TD: 06/23/2010 14. Date Casing Set or D&A: 07/25/2010

15. Well Classification:
 Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 12323 TVD** 12294 17 Plug Back Total Depth MD 12295 TVD** 12266

18. Elevations GR 6945 KB 6973 One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:
 CBL, RPM

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	24	18		48	80	135	0	80	VISU
SURF	14+3/4	9+5/8		0	3,420	1,682	0	3,420	VISU
1ST	7+7/8	4+1/2		0	12,313	1,391	1,400	12,313	CBL

ADDITIONAL CEMENT

Cement work date: _____

Details of work:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
MESAVERDE	7,491		<input type="checkbox"/>	<input type="checkbox"/>	
CAMEO	10,728		<input type="checkbox"/>	<input type="checkbox"/>	
ROLLINS	11,209		<input type="checkbox"/>	<input type="checkbox"/>	
COZZETTE	11,376		<input type="checkbox"/>	<input type="checkbox"/>	
CORCORAN	11,621		<input type="checkbox"/>	<input type="checkbox"/>	
SEGO	12,224		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

FORMATION LOG INTERVALS AND TEST ZONES COMMENTS: SURFACE PRESSURE = 0#
LOGS WILL BE SUBMITTED TO THE COGCC BY THE SERVICE COMPANY UPON PAD DRILLED OUT. WILLIAMS WILL UPLOAD DIGITAL LOGS TO THE COGCC WEBSITE.

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

Signed: _____

Print Name: JENN MENDOZA

Title: PERMIT TECH

Date: 4/25/2011

Email: JENN.MENDOZA@WILLIAMS.COM

Attachment Check List

Att Doc Num	Document Name	attached ?	
<u>Attachment Checklist</u>			
2586971	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2586970	Directional Survey **	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Logs	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Other Attachments</u>			
2586969	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	LAS LOGS WILL BE UPLOADED WHEN PAD IS DRILLED OUT.	3/9/2011 3:17:50 PM

Total: 1 comment(s)